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Fill in this information to identify your case	9:
United States Bankruptcy Court for the: Northern District of Illinois	
Case number (if known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

AUG 07 2018

JEFFREY P. ALLSTEADT, CLERK
INTAKE 1

☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1. Your full name		
Write the name that is on you government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	First name CS how Middle name Last name Suffix (Sr., Jr., II, III)	First name Middle name Last name Suffix (Sr., Jr., II, III)
All other names you have used in the last 8 years Include your married or maiden names.	First name Coshown Middle name Last name	First name Middle name Last name
	First name	First name Middle name
•	Last name	Last name
3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx - xx - & 3 5 9 or 9 xx - xx -	xxx - xx

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Debtor 1 Valence 1 First Name Middle	Name Last Name	Case number (# known)
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in	Thave not used any business names or EINs.	☐ I have not used any business names or EINs.
the last 8 years	Business name	Business name
Include trade names and doing business as names	Business name	Business name
	EIN	EIN
	EIN .	EIN
5. Where you live		If Debtor 2 lives at a different address:
	Goo W Ranbow Number Street	Number Street
	Glenwood II 60/25 City State ZIP Code	City State ZIP Code
	County	County
÷	If your malling address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
•	Number Street	Number Street
	P.O. Box	P.O. Box
	City State ZIP Code	City State ZIP Code
. Why you are choosing	Check gne:	Check one:
this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Debtor 1

Valencia (OS) ASSA JUNCA
First Name Middle Name Last Name

Case number (if known)

	Part 2: Tell the Court Abo	ut Your	Bankru	ptcy Case			
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	are choosing to file	La Ch	Maria Cara		,		
		☐ Ch	pter 11				
		☐ Cha	pter 12				
		☐ Cha	pter 13				
8.	How you will pay the fee	you sub	n court i rself, yo mitting y	or more details and may pay with	about how you r cash, cashier's o	nay pay. Typica check, or monev	neck with the clerk's office in your lly, if you are paying the fee y order. If your attorney is pay with a credit card or check
		∏ I-π€ App	d to pa	ay the fee in ins for Individuals to	tallments. If yo Pay The Filing	ou choose this o	ption, sign and attach the ents (Official Form 103A).
		☐ I red By land less pay	uest thaw, a jud than 15 the fee	nat my fee be wa dge may, but is i 50% of the officia in installments).	aived (You may not required to, value of the thick the t	request this op waive your fee, at applies to you nis option, you m	tion only if you are filing for Chapter 7. and may do so only if your income is ur family size and you are unable to nust fill out the Application to Have the with your petition.
9,	Have you filed for bankruptcy within the	D NO	,				
	last 8 years?	Yes.	District	W	When	MM / DD / YYYY	Case number
			District				
						MM / DD / YYYY	Case number
			District		When	MM / DD / YYYY	Case number
10.	Are any bankruptcy	□ No	gor				
	cases pending or being filed by a spouse who is	☐ Yes.	Debtor				Relationship to you
•	not filing this case with you, or by a business partner, or by an affiliate?		District	V-0-7	When	MM/DD/YYYY	Case number, if known
			Debtor _				Relationship to you
							Case number, if known
						MM / DO / YYYY	
	Do you rent your residence?		Go to lin Has you	ne 12. Ir landlord obtained	f an eviction judgr	ment against you?	
	•			Go to line 12.	, 0	J	
			Yes.	Fill out <i>Initial State</i> of this bankruptcy	ement About an E petition.	iviction Judgment	Against You (Form 101A) and file it as

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Debtor 1 Karana Sandada Na	Case number (# known)
Part 3: Report About Any	Businesses You Own as a Sole Proprietor
12. Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.	No. Go to Part 4. Yes. Name and location of business Name of business, if any Number Street City State ZIP Code Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6))
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D).	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.
Part 4: Report if You Own of A. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to	Have Any Hazardous Property or Any Property That Needs Immediate Attention No Yes. What is the hazard?
public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?	If immediate attention is needed, why is it needed? Where is the property? Number Street
	City State ZIP Code

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Debtor 1

Valencia ashum 1400

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You hust check one:

received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ Disability. My physical disability causes

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I

reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Debtor 1

Valence lostan lyall
First Name Middle Name Last Name

	Part 6: Answer These Que	estions for Reporting Purpo	ses	
16a. Are your debts primarily consumer debts? Cons you have?			arily consumer debts? Consumer de ual primarily for a personal, family, or ho	bts are defined in 11 U.S.C. § 101(8) usehold purpose."
	, , , , , , , , , , , , , , , , , , , ,	No. Go to line 16b. Yes. Go to line 17.		
		16b. Are your debts prima money for a business or i	rily business debts? Business debts nvestment or through the operation of the	s are debts that you incurred to obtain e business or investment.
	·	☐ No. Go to line 16c. ☐ Yes. Go to line 17.	,	
		16c. State the type of debts yo	u owe that are not consumer debts or bu	isiness debts.
17	. Are you filing under Chapter 7?	☐ No. I am not filing under C	hapter 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and administrative expenses	U-No	ter 7. Do you estimate that after any exer es are paid that funds will be available to	mpt property is excluded and distribute to unsecured creditors?
	are paid that funds will be available for distribution to unsecured creditors?	☐ Yes	· ·	
18.	How many creditors do you estimate that you owe?	☐ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000
19.	How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
	How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Fo	r you	I have examined this petition, an correct.	nd I declare under penalty of perjury that	the information provided is true and
		If I have chosen to file under Cha of title 11, United States Code. I under Chapter 7.	apter 7, I am aware that I may proceed, i understand the relief available under ea	f eligible, under Chapter 7, 11,12, or 13 ch chapter, and I choose to proceed
		If no attorney represents me and this document, I have obtained a	I I did not pay or agree to pay someone wand read the notice required by 11 U.S.C	who is not an attorney to help me fill out . § 342(b).
			h the chapter of title 11, United States C	
		I understand making a false state with a bankruptcy case can result 18 U.S.C. §§ 152, 1341, 1579, a	ii ki liides Lib (0 5/50) ()()) or imprisonme:	money or property by fraud in connection nt for up to 20 years, or both.
		Signature of Debtor 1	w X	
	•	Executed on MM / DD /Y	Signature Executed	on
Tar.	Takini inggapat sanggi spapatanggi paggapanga	COMPANY OF THE PROPERTY OF THE		אואו ומואו או אואו

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Debtor 1

"Jaky	ncia	Lynch
First Name	Middle Name	Last Name

Connection	
Case number (if known)	-

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

	Date	
Signature of Attorney for Debtor		MM / DD /YYYY
Yalencia Lynch	1	
Printed name	·	
Firm name		
Number Street	***************************************	
	Whate warmer	
City	State	ZIP Code
Contact phone	Email addres	SS
Bar number	State	

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Debtor 1

First Name Middle Name Last Name

Case number (#known)_____

For you if you are filing this bankruptcy without an attorney

If you are represented by an attorney, you do not need to file this page. The law allows you, as an individual, to represent yourself in bankruptcy court, but you should understand that many people find it extremely difficult to represent themselves successfully. Because bankruptcy has long-term financial and legal consequences, you are strongly urged to hire a qualified attorney.

To be successful, you must correctly file and handle your bankruptcy case. The rules are very technical, and a mistake or inaction may affect your rights. For example, your case may be dismissed because you did not file a required document, pay a fee on time, attend a meeting or hearing, or cooperate with the court, case trustee, U.S. trustee, bankruptcy administrator, or audit firm if your case is selected for audit. If that happens, you could lose your right to file another case, or you may lose protections, including the benefit of the automatic stay.

You must list all your property and debts in the schedules that you are required to file with the court. Even if you plan to pay a particular debt outside of your bankruptcy, you must list that debt in your schedules. If you do not list a debt, the debt may not be discharged. If you do not list property or properly claim it as exempt, you may not be able to keep the property. The judge can also deny you a discharge of all your debts if you do something dishonest in your bankruptcy case, such as destroying or hiding property, falsifying records, or lying. Individual bankruptcy cases are randomly audited to determine if debtors have been accurate, truthful, and complete. Bankruptcy fraud is a serious crime; you could be fined and imprisoned.

If you decide to file without an attorney, the court expects you to follow the rules as if you had hired an attorney. The court will not treat you differently because you are filing for yourself. To be successful, you must be familiar with the United States Bankruptcy Code, the Federal Rules of Bankruptcy Procedure, and the local rules of the court in which your case is filed. You must also be familiar with any state exemption laws that apply.

Are you aware that filing for bankruptcy is a serious act consequences? No Yes	ion with long-term financial and legal
Are you aware that bankruptcy fraud is a serious crime inaccurate or incomplete, you could be fined or imprisor No	and that if your bankruptcy forms are ned?
Did you pay or agree to pay someone who is not an attornal No Yes. Name of Person Attach Bankruptcy Petition Preparer's Notice, Decl	
By signing here, I acknowledge that I understand the risi have read and understood this notice, and I am aware the attorney may cause me to lose my rights or property if I	nat filing a bankruptcy case without an do not properly handle the case.
Signature of Debtor 1	Signature of Debtor 2
Date OYOK / 8 MM / DD / YYYY	Date MM / DD /YYYY
Contact phone	Contact phone
Cell phone 312-375-54-8	Cell phone
Email address Valca (a Wold) [Maj]. W	Email address

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Fill in this information	on to identify your case:			
Debtor 1 Value	cie lashow	Luca		
First Name Debtor 2	Middle Name	Last Name		
(Spouse, if filing) First Name	Middle Name	Last Name		
United States Bankruptcy	Court for the: Northern District of II	llinois		
Case number (If known)				Check if this is a amended filing
	Your Assets and Li		Certain Statistical In	
your original forms, you	of your schedules first; then co u must fill out a new Summary a Vour Assets	mplete the informatio	gether, both are equally responsible n on this form. If you are filing amen he top of this page.	for supplying correct ided schedules after you file
				Vous
				Your assets Value of what you own
	rty (Official Form 106A/B) al real estate, from <i>Schedule A/B</i>			125
oopy ii/io oo, 10ta	in rear estate, from Schedule A/B			\$ <u>-0.000</u>
1b. Copy line 62, Tota	il personal property, from Schedule	e A/B		\$ 15,000
1c. Copy line 63, Tota	l of all property on Schedule A/B			s 140,000
Part 2: Summarize	Your Liabilities			
				Your liabilities
2. Schedule D: Creditors	Who Have Claims Secured by Pro	onerty (Official Form 10	8D)	Amount you owe
2a. Copy the total you	listed in Column A, Amount of clair	m, at the bottom of the	last page of Part 1 of Schedule D	\$ 140,000
3. Schedule E/F: Creditor 3a. Copy the total clain	rs Who Have Unsecured Claims (C ns from Part 1 (priority unsecured (Official Form 106E/F) claims) from line 6e of a	Schedule E/F	<u>\$ 130,027</u>
			of Schedule E/F	
			Your total liabilities	s s 270,000 à
Part 3: Summarize	Your Income and Expenses			
4. Schedule I: Your Incom				350000
		edule I		s <u> </u>
5. Schedule J: Your Exper				3500,00 3700,00
you montally expi	Groce Heri Bre 220 of Screaule J			\$ _ / 0,00

Doc 1 Filed 08/07/18 Entered 08/07/18 13:48:42 Desc Main Page 10 of 76 Document Debtor 1 Case number (# known) Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 500,0 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$ /// coa 100 9d. Student loans. (Copy line 6f.) 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

9g. Total. Add lines 9a through 9f.

1004.00

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Fill in this information to identify your case and t	his filing:		•
Debtor 1 MMMCIA LASNAM	lunch		
First Name Middle Name Debtor 2	ust Name		
(Spouse, If filling) First Name Middle Name United States Bankruptcy Court for the: Northern District	Last Name		
Case number	of Hilnois		
			Check if this is an
Official Form 106A/B			amended filing
	4		
Schedule A/B: Proper			12/15
category where you think it fits best. Be as compresponsible for supplying correct information. If it write your name and case number (if known). Ans	ns. List an asset only once. If an asset fits in more lete and accurate as possible. If two married peop more space is needed, attach a separate sheet to take every question. In Land, or Other Real Estate You Own or Ha	le are filing together, b his form. On the top of	oth are equally
Do you own or have any legal or equitable inter			
No. Go to Part 2.	The state of the s	orty :	
Yes. Where is the property?	What is the property? Check all that apply.	Do not do took on the	
11. GOON: Kainbow	Single-family home Duplex or multi-unit building	the amount of any secur	laims or exemptions. Put ed claims on Schedule D: ims Secured by Property.
Street address, if available, or other description	Condominium or cooperative		Current value of the
	☐ Manufactured or mobile home ☐ Land	entire property? \$ <u>125,001.00</u>	portion you own?
alerwood II Wils	Investment property		
City State ZIP Code	Timeshare Other	Describe the nature interest (such as fee the entireties, or a life	simple, tenancy by
A (Who has an interest in the property? Check one.	Owner-	e estate), il kliowii.
County	Debtor 1 only Debtor 2 only		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is co (see instructions)	ommunity property
	Other information you wish to add about this it	em, such as local	
If you own or have more than one, list here:	property identification number:		
	What is the property? Check all that apply.	Do not deduct secured cla	aims or exemptions. Put
1.2. Street address, if available, or other description	Single-family home Duplex or multi-unit building	the amount of any secure Creditors Who Have Clair	d claims on Schedule D. ns Secured by Property.
,	☐ Condominium or cooperative ☐ Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Land	\$	\$
City State ZIP Code	Timeshare	Describe the nature of	
	Other	interest (such as fee the entireties, or a life	simple, tenancy by e estate), if known.
	Who has an interest in the property? Check one. Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only		
	☐ At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
	Other information you wish to add about this item	n, such as local	
	property identification number:		

Entered 08/07/18 13:48:42 Filed, 08/07/18 Page 12 of 76 Debtor 1 What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put ☐ Single-family home the amount of any secured claims on Schedule D: 1.3 Creditors Who Have Claims Secured by Property. Street address, if available, or other description Duplex or multi-unit building Condominium or cooperative Current value of the Current value of the entire property? portion you own? Manufactured or mobile home Investment property City ZIP Code ☐ Timeshare Describe the nature of your ownership interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Debtor 1 and Debtor 2 only Check if this is community property At least one of the debtors and another (see instructions) Other information you wish to add about this item, such as local property identification number: 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. Part 2: **Describe Your Vehicles** Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles No. Yes Who has an interest in the property? Check one. Make: 3.1, Do not deduct secured claims or exemptions. Put Debtor 1 only the amount of any secured claims on Schedule D: Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? At least one of the debtors and another portion you own? Other information: 13,000,00 Check if this is community property (see instructions)

3.2.	Make:		Who has an interest in the property? Check one.	Do
	Model:		Debtor 1 only	the Cre
	Year:	No. in contrast of the contras	Debtor 2 only	Cui
	Approximate mileage:		Debtor 1 and Debtor 2 only At least one of the debtors and another	ent
	Other information:		Wilder and of the desicing and another	
	The state of the s	OF No. of Control of C	☐ Check if this is community property (see instructions)	\$

Oo not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D:* Creditors Who Have Claims Secured by Property.

Current value of the entire property?

Current value of the portion you own?

 \$

Filed 08/07/18 Entered 08/07/18 13:48:42 Desc Main Page 13 of 76 Debtor 1 Case number (it known) Who has an interest in the property? Check one. 3.3. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) Who has an interest in the property? Check one. 34 Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Approximate mileage: entire property? portion you own? At least one of the debtors and another Other information: Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowingbiles, motorcycle accessories ☐ No Yes Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Debtor 1 and Debtor 2 only Current value of the Current value of the Other information: At least one of the debtors and another portion you own? entire property? Check if this is community property (see instructions) If you own or have more than one, list here: Who has an interest in the property? Check one. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Debtor 2 only Year: Current value of the Current value of the

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

instructions)

portion you own?

entire property?

Other information:

Debtor 1 and Debtor 2 only

At least one of the debtors and another

Check if this is community property (see

ase 18-22177 Doc 1 Filed 08/07

Case number (if known)

Part 3:

Describe Your Personal and Household Items

	portion you own? Do not deduct secured claims or exemptions.
6. Household goods and furnishings	or exemplation.
Examples: Major appliances, furniture, linens, china, kitchenware	
□ No	
Tes. Describe Masos officials Formitie, Killing was	\$ //,900.00
7. Electronics	- 1.4
Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games	
□ No	1 5,000 p
Televisias, Confortes, Peliphone	\$ -1000 1
8. Collectibles of value	
Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles	
Yes. Describe	****
Tes. Describe	\$
9. Equipment for sports and hobbies	i
Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments	
Q No	
Yes. Describe	
	\$
10. Firearms	i
Examples: Pistols, rifles, shotguns, ammunition, and related equipment	
Q No	
Yes. Describe	\$
11. Clothes	Y
Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories No	
Dres. Describe Every dry Clothes & Shorts	\$ \(\langle \)
12. Jewelry	
Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, helrloom jewelry, watches, gems, gold, silver	
☐ Yes. Describe	
	\$
13. Non-farm animals Examples: Dogs, cats, birds, horses	
Yes. Describe	\$
14. Any other gersonal and household items you did not already list, including any health aids you did not list	1
Yes. Give specific	
information	5
15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached	7
for Part 3. Write that number here	LO,000 a

Page 15 of 76

Case number (if known)

Part 4:

Describe Your Financial Assets

the state of the s	ny legal or equitable interest i	n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16. Cash <i>Examples:</i> Money yo	ou have in your wallet, in your ho	me, in a safe deposit box, and on hand when yo	u file vour petition	
□ No		,		
☐ Yes			Cash: /07.00	\$
17. Deposits of money Examples: Checking, and other	, savings, or other financial acco similar institutions. If you have n	unts; certificates of deposit; shares in credit unio nultiple accounts with the same institution, list ea	ns, brokerage houses, ach.	
Q ves		Institution name:		
	17.1. Checking account:	Bank & America		\$ /00.00
	17.2. Checking account:			\$
	17.3. Savings account:			•
	17.4. Savings account:			D
	17.5. Certificates of deposit:	- Auto-Carlos Carlos Ca		5
	17.6. Other financial account:			3
	17.7. Other financial account:			\$
	17.8. Other financial account:			\$
	17.9. Other financial account:		, i and i an	\$
		- Andrew		\$
18. Bonds, mutual funds, Examples: Bond funds,		rage firms, money market accounts		
□ res	Institution or issuer name:			
				\$
			TO ATTACAMENT	\$
				\$
9. Non-publicly traded s an LLC, partnership, a	tock and interests in incorpora and joint venture	ated and unincorporated businesses, includi	ng an interest in	
Q No	Name of entity:		% of ownership:	
Yes. Give specific information about			0%%	\$
them			0%%	\$
			0% %	\$

Case 18-22177 Doc 1 Filed 08/07/18 Filst Name Middle Name Last Name	B Entered 08/07/18 13:48:42 Page 16 of 76 Case number (# known)	Desc Main	
ment and corporate honds and other pegotiable and non-re	onotiphia inotrumanta		

No	Issuer name:		
information about			
them			\$
			\$
	***************************************		\$
etirement or pensior	accounts		
		401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
No	_	grand, as east, portain of profit officing plans	
Yes. List each			
account separately.	Type of account:	Institution name:	
	401(k) or similar plan		\$
	Pension plan:		
	IRA:		\$
			\$
	Retirement account:		\$
	Keogh:		\$
	A 1 400		
	Additional account:	MIN	5
ur share of all unused	Additional account: prepayments deposits you have n	nade so that you may continue service or use from a company	\$
curity deposits and pur share of all unused amples: Agreements of amples or others	Additional account: prepayments deposits you have n		
ur share of all unused amples: Agreements v	Additional account: prepayments deposits you have n	nade so that you may continue service or use from a company	
ur share of all unused amples: Agreements of mpanies, or others	Additional account: orepayments deposits you have n with landlords, prepai	nade so that you may continue service or use from a company	
ur share of all unused amples: Agreements v mpanies, or others No	Additional account: orepayments deposits you have n with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications	\$
ur share of all unused amples: Agreements was amples, or others	Additional account: prepayments deposits you have nowith landlords, prepail	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	
ur share of all unused amples: Agreements was amples, or others	Additional account: prepayments deposits you have n with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$
ur share of all unused amples: Agreements was amples, or others	Additional account: orepayments deposits you have n with landlords, prepai	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$
ur share of all unused amples: Agreements was amples, or others	Additional account: orepayments deposits you have n with landlords, prepai	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$
ur share of all unused amples: Agreements was amples, or others	Additional account: prepayments deposits you have n with landlords, prepai	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$
ur share of all unused amples: Agreements was amples, or others	Additional account: prepayments deposits you have nowith landlords, prepaid Electric: Gas: Heating oil: Security deposit on renown prepaid rent: Telephone:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$
ur share of all unused amples: Agreements was amples, or others	Additional account: prepayments deposits you have n with landlords, prepai Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$
ur share of all unused amples: Agreements was amples, or others No Yes	Additional account: prepayments deposits you have nowith landlords, prepaid lines Electric: Gas: Heating oil: Security deposit on renowith landlords. Telephone: Water: Rented furniture:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements was appanies, or others No Yes	Additional account: prepayments deposits you have n with landlords, prepai Electric: Gas: Heating oil: Security deposit on ren Prepaid rent: Telephone: Water:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements with the meanies, or others No Yes	Additional account: prepayments deposits you have nowith landlords, prepaid Electric: Gas: Heating oil: Security deposit on renepaid rent: Telephone: Water: Rented furniture: Other:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements of appanies, or others No Yes	Additional account: prepayments deposits you have nowith landlords, prepaid Electric: Gas: Heating oil: Security deposit on renepaid rent: Telephone: Water: Rented furniture: Other:	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$
ur share of all unused amples: Agreements with the mpanies, or others No Yes	Additional account: prepayments deposits you have nowith landlords, prepaid Electric: Gas: Heating oil: Security deposit on renepaid rent: Telephone: Water: Rented furniture: Other:	nade so that you may continue service or use from a company d rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	\$\$ \$\$ \$\$ \$\$

Filed 08/07/18 Entered 08/07/18 13:48:42 Desc Main Page 17 of 76 Debtor 1 Case number if k 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). Yes Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit No. ☐ Yes. Give specific information about them. 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements □ No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses O No Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you Yes. Give specific information Federal about them, including whether you already filed the returns State: and the tax years..... Local: 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement **□** No ☐ Yes. Give specific information..... Alimony: Maintenance: Support: Divorce settlement: Property settlement: 30. Other amounts someone owes you Examples: Uppaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

☐ Yes. Give specific information.....

Filed 08/07/18 Entered 08/07/18 13:48:42 Desc Main Page 18 of 76 Debtor 1 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Q No Yes. Name the insurance company Company name: Beneficiary: Surrender or refund value of each policy and list its value... 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. Q No Yes. Give specific information. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue Yes. Describe each claim..... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims O No Yes. Describe each claim.... 35. Any financial assets you did not already list O No ☐ Yes. Give specific information...... 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned □ No Yes. Describe... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ☐ No

Yes. Describe...

Debtor 1 Case 18-22177 Doc 1 Filed 08/07/18 Entered 08/07/18 13:48:42 Debtor 1 Page 19 of 76 Case number (if known)	2 Desc Main
40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade 1. No 1. Yes. Describe	
	\$
41. Inventory No Yes. Describe	\$
42. Interests in partnerships or joint ventures No Yes. Describe Name of entity: % of ownersh	sin.
	пр. \$
	\$ \$
43. Customer lists, mailing lists, or other compilations No Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	V
Yes. Describe	s
44. Any business-related property you did not already list No Yes. Give specific information	\$
	\$ \$
	\$
	\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest If you own or have an interest in farmland, list it in Part 1.	st In.
46. Do you ewn or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. Yes. Go to line 47.	
47. Farm animals	Current value of the portion you own? Do not deduct secured claims or exemptions.
Examples: Livestock, poultry, farm-raised fish	
O Yes	
	\$

Debtor 1	Case 18-22177 Doc 1 Filed 08/07/18 First Name Middle Name Last Name	Entered 08/07/18 13:48:42 Desc Main Page 20 of 76 Case number (if known)	
	,		
48. Crops—ei	ther growing or harvested		
🔲 Yes. G	ive specific ation		······
49. Farm and	fishing equipment, implements, machinery, fixtures, and too		
		\$	
. Approximately	fishing supplies, chemicals, and feed		
☐ No ☐ Yes		The first test and the profession of the content of	
	Frank Marian Charles for state by what Son pages in your for your participation of the state of	\$	
51. Any farm-	and commercial fishing-related property you did not already	list	
Yes. Gi informa	ve specific tion	¢	
52 Add the do	ollar value of all of your entries from Part 6, including any en		
for Part 6.	Write that number here	→ ³	
	Market Control of the		
Part 7: D	escribe All Property You Own or Have an Interc	est in That You Did Not List Above	
	re other property of any kind you did not already list?		-
D 1/0			
Yes. Giv	ve specific	\$	
		\$	
54. Add the dol	lar value of all of your entries from Part 7. Write that number	here	
		Lancia de la Carta	
Part 8: Li	st the Totals of Each Part of this Form		:
55. Part 1: Tota	I real estate, line 2	→ \$:
56. Part 2: Tota	l vehicles, line 5 \$		•
57. Part 3: Total	personal and household items, line 15 \$		
58. Part 4: Total	financial assets, line 36 \$		
59. Part 5: Total	business-related property, line 45 \$		
60. Part 6: Total	farm- and fishing-related property, line 52 \$	Mary	
61. Part 7: Total	other property not listed, line 54 + \$		
62. Total persor	sal property. Add lines 56 through 61	Copy personal property total → + \$	
63. Total of all p	roperty on Schedule A/B. Add line 55 + line 62		
Official Form 10	OSAID -		

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Fill in this information to ide	entify your case:			
Debtor 1 First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing) First Name	, Middle Name	ł Last Name	WATER-BOOK P	
United States Bankruptcy Court fo	or the: Northern District of i	Illinois		
Case number (If known)				Check if this amended fili

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	 Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) 					
2.	For any property you list on Schedule A/B ti	hat you claim as exem	pt, fill in the information below.			
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption		
		Copy the value from Schedule A/B	Check only one box for each exemption.			
	Brief description: Line from	\$	\$ 100% of fair market value, up to			
	Brief description: Line from Schedule A/B:	\$	any applicable statutory limit \$ 100% of fair market value, up to any applicable statutory limit			
	Brief description: Line from Schedule A/B:	\$	\$ 100% of fair market value, up to any applicable statutory limit			
	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 y No Yes. Did you acquire the property covered b No Yes	more than \$160,375? rears after that for cases				

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Case number (if known)

Part 2:

Additional Page

Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Copy the value from Schedule A/B	Check only one box for each exemption	
 \$	□s	
	100% of fair market value, up to	
\$	□s	
	100% of fair market value, up to any applicable statutory limit	
\$	Q \$	
	☐ 100% of fair market value, up to any applicable statutory limit	
\$	- \$	
	100% of fair market value, up to any applicable statutory limit	-
\$	□ s	
	☐ 100% of fair market value, up to any applicable statutory limit	
<u> </u>		
	☐ 100% of fair market value, up to any applicable statutory limit	Marketarker and the second and the s
_ \$	□ s	
	100% of fair market value, up to any applicable statutory limit	
_ \$	□ \$	
	☐ 100% of fair market value, up to any applicable statutory limit _	
_ \$		
	100% of fair market value, up to any applicable statutory limit	
\$	□ s	
	100% of fair market value, up to any applicable statutory limit	
. \$	D \$	
	100% of fair market value, up to any applicable statutory limit	
S	Π s	
*	100% of fair market value, up to	
	sssssssss	Copy the value from Schedule A/B \$

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Fill in this information to identify your ca	ase:			
Debtor 1 VMMM \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	MUM MACE			
First Name Middle Debtor 2	e Name Last Name			
	e Name Last Name			
United States Bankruptcy Court for the: Northern	n District of Illinois			
Case number (If known)			[] Charle	that to be also
(II NAME)				if this is an ded filing
Official Form 106D				-
	rs Who Have Claims Secur	ad by Dra		
				12/15
iniormation, if more space is needed, cor	o. If two married people are filing together, both are e by the Additional Page, fill it out, number the entries	equally responsible , and attach it to thi	for supplying correct s form. On the top of	:t f any
additional pages, write your name and ca	se number (if known).		-	•
1. Do any creditors have claims secured				
No. Check this box and submit this forYes. Fill in all of the information below	rm to the court with your other schedules. You have noth	ning else to report on	this form.	
165. Fill to all of the shormation below	,			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has r	more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor t	has a particular claim, list the other creditors in Part 2	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	habetical order according to the creditor's name.	value of collateral.	claim **	Ifany
2.1 SSGA Motor Acceptance	Describe the property that secures the claim:	\$ /9,000 D	\$	\$
Po Box 662366	Auto Loan			
Multiper Street	As of the date you file, the claim is: Check all that apply			
T. T. 75311 3	Contingent	•		
City State ZIP Code				
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
Check if this claim relates to a	Other (including a right to offset)	***		
community debt Date debt was incurred				
Date dept was incurred 2.2	Last 4 digits of account number	######################################	Weddinkels a 1970 c. as a representatively and another processing consistence and processing con-	alfalle factor planet for Comment to an action for Comment to a
Creditor's Name	Describe the property that secures the claim:	\$ 1	\$\$	
Number Street		444		
Traines. Carox	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	An agreement you made (such as mortgage or secured			
Debtor 2 only Debtor 1 and Debtor 2 only	car loan) Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	Judgment lien from a lawsuit			
☐ Check if this claim relates to a	Other (including a right to offset)			
community debt				THE STANDARD
Date debt was incurred Add the dollar value of your entries in C	Last 4 digits of account number olumn A on this page. Write that number here:	- 17-mm (D)	وم برود والبواري والوساء و معالمات والمرود والمراقب المواجعة والمساور والمساورة والمراجعة والمساورة والمساورة	Matthews (A-1) with the A-1 with the Secretary growths according
And the dollar value of your entries in C	olumn A on this page. Write that number here:	\$ <i>17,500.00</i>		į

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First Name Middle Name	Last Name Case nul	TIDEF (if known)		
Additional Page Part 1: After listing any entries on this by 2.4, and so forth.	s page, number them beginning with 2.3, followed	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecure portion If any
Creditor's Name	Describe the property that secures the claim:	\$		- н ашу
Ground Straing		1		
Number Street				
City State ZIP Code Who owes the debt? Check one,	As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Nature of lien. Check all that apply.	l		
Debtor 1 only	An agreement you made (such as mortgage or secured)			
Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a community debt	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
a service and the service service and the service serv	Describe the property that the	والمراجعة والمستعدم والمراجعة والمستعدد والمراجعة والمستعدد والمراجعة والمستعدد والمراجعة والمراجعة والمراجعة	n, traditional contrates to Capacity on his artifactory and gradual confession and his contrates and the contrates of the con	vineralas de mos en en estadas per estadas de la como en estada de la como en estada de la como en estada de l
Creditor's Name	Describe the property that secures the claim:		\$\$_	
Number Street	-			
ouest.	As of the date you file, the claim is: Check all that apply.			
	Contingent			
City State ZIP Code	☐ Unliquidated			
, once zij oode	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only	An agreement you made (such as mortgage or secured			
Debtor 1 and Debtor 2 only	car loan)			
At least one of the debtors and another	Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit			
Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
** SECOND RELIGION SECOND SECO	Describe the property that secures the claim: \$	r Birtis və Abdəsillikar vəri ilər bə dəsilisə bələrən dəliyyən karasılırı və si ili dölülə ililiyən,	والمرافقة والمرافقة والمرافقة والمنافقة والمنا	and and the same and a second second
Creditor's Name	s_	\$	\$ <u></u>	
Number Street				
The second secon	As of the date you file, the claim is: Check all that apply.			
City State 7/P Code	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who owes the debt? Check one.				
Debtor 1 only	Nature of lien. Check all that apply.			
Debtor 2 only	An agreement you made (such as mortgage or secured car loan)			or some factor
Debtor 1 and Debtor 2 only	Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	User (including a right to offset)			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Add the dollar value of your entries	in Column A on this page. Write that number here: \int_{s}			TO LAKE THE PARTY OF THE PARTY

Write that number here:

If this is the last page of your form, add the dollar value totals from all pages.

Part 2:	List Others to Be Notified for a Debt That You Already Listed	
	List Others to be nothled for a pept That You Already Listed	

ag yo	ency is tr u have mo	ying to collect from your ore than one creditor i	ou for a debt you owe to	o someone else, list t It vou listed in Part 1.	or a debt that you already listed in Part 1. For example, if a collection the creditor in Part 1, and then list the collection agency here. Similarly, if , list the additional creditors here. If you do not have additional persons to
		-		, ,	On which line in Part 1 did you enter the creditor?
	Name	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	, , , , , , , , , , , , , , , , , , , ,	· · · · · · · · · · · · · · · · · · ·	Last 4 digits of account number
	Number	Street			_
	City		State	ZIP Code	_
			for the device of No. 633 No. 11 to the Annual Complete Species of Species (ing was not a proposition of the state of th	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street			_
	City		State State	ZIP Code	_
		The second secon		enter del 1 m il 1907 il respectivo di Perio del Miller Leverando en producció e del giologico (q	On which line in Part 1 did you enter the creditor?
	Name				Last 4 digits of account number
	Number	Street		*	
			·		-
	City		State	ZIP Code	-
			o Profes (1941) - Principal Leefstor et PDA leedsterroom (About 1994) - Abre Gordon (1	TOO - "concress" iiii iii aa constantii waxaa ii ii aa caa	On which line in Part 1 did you enter the creditor?
ı	Name				Last 4 digits of account number
ĩ	Number	Street	,		-
-			PP-900-01-01-01-01-01-01-01-01-01-01-01-01-0		-
	City		State	ZIP Code	-
				و سازه که در دیده که در خود نظام کرده می گذاشته که در کار در در سازه که خود نظام که خود کرده که که در در در در	On which line in Part 1 did you enter the creditor?
ŀ	Name				Last 4 digits of account number
4	lumber	Street			-
-					
	City	en skille 19, en eg en	State	ZIP Code	
╛_		1984 Market W. Barrer		e in general and the second and the	On which line in Part 1 did you enter the creditor?
N	lame				Last 4 digits of account number
N	umber	Street			
-	74001			MANAGA A	· wanter steps.
č	ity		State	ZIP Code	

	Case 18-22177 Doc 1	Filed 08/07/18	Entered 08/07/18 1	3:48:42	Desc Main
100000000	Fill in this information to identify your case:	Document	Page 26 of 76		
ſ	Debtor 1 VANNA NOVALLA	1 Linch			
	First Name Middle Name	Last Name			
	Debtor 2 (Spouse, if filing) First Name Middle Name	Last Name	. 		
	United States Bankruptcy Court for the: Northern Distric	ct of Illinois			
İ	Case number				Check if this is an
L	(If known)				amended filing
	Official Form 106E/F				
S	chedule E/F: Creditors \	Who Have U	nsecured Clair	ns	12/15
A/ cr ne an	e as complete and accurate as possible. Use Pa st the other party to any executory contracts or (B: Property (Official Form 106A/B) and on Sche editors with partially secured claims that are lis seded, copy the Part you need, fill it out, number by additional pages, write your name and case n	unexpired leases that of dule G: Executory Conted in Schedule D: Created the entries in the boxed umber (if known).	could result in a claim. Also li tracts and Unexpired Leases (ditors Who Have Claims Socie	st executory of Official Form	contracts on <i>Schedule</i> 106G). Do not include any
	art 1: List All of Your PRIORITY Unsecu				
1.	Do any creditors have priority unsecured claim Go to Part 2.	ns against you?			
2.	List all of your priority unsecured claims. If a ceach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of (For an explanation of each type of claim, see the	claim has both priority claims in alphabetical or Part 1. If more than one	vand nonpriority amounts, list the der according to the creditor's na creditor holds a particular claim	at claim here a	nd show both priority and
	(* 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5. 5.	iristructions for this form	in the instruction booklet.)	Total claim	Priority Nonpriority
	101.61			, otal Claim	amount amount
. 1	Provide Contract Name (Clucation	Last 4 digits of accou	nt number 2 5 6 /	\$ 140,000	>ss
	Priority Creditor's Name Rd Suite	When was the debt in	curred? 08/2015	ş	
	Number Street				• •
	Awara Co. Kooky		, the claim is: Check all that apply.		
	City State ZIP Code	Contingent Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	☐ Disputed			
	Debtor 2 only	Type of PRIORITY ur	secured claim:		•
	Debtor 1 and Debtor 2 only	Domestic support ob			
	At least one of the debtors and another Check if this claim is for a community debt	☐ Taxes and certain of	her debts you owe the government		
	Is the claim subject to offset?	Claims for death or plintoxicated	ersonal injury while you were		
	□ No	Other, Specify 54	uctent Dans		
<u> </u>	Yes	ناست. « و مستوره نوی است خود استوره و استوره و در	ren englische der somme der der gele son ausstraßen der der der der vor vor der delegen and der vorliebe der d	i nijeme o olije konezani kralimi ora	and the second s
	Priority Creditor's Name	Last 4 digits of accoun	nt number 5948	1.17000	\$\$
	LOD GKSal Viedu Dr	When was the debt inc	urred? <u>7/2000</u>		
	Number Street 800	As of the date you file,	the claim is: Check all that apply.		:
	1.16ren, PA, 150 Kb	☐ Contingent			<i>!</i>
	City State ZIP Code	Unliquidated			
	Who incurred the debt? Check one. Debtor 1 only	□ Disputed			- A Paya de
	Debtor 2 only	Type of PRIORITY uns			
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Domestic support oblig	gations er debts you owe the government		
	☐ Check if this claim is for a community debt	Claims for death or pe	rsonal injury while you were		
	Is the claim subject to offset?	intoxicated	last des		
	□ No	☐ Other. Specify ○	NOVI TIE)		The paper
	Yes	e	Secure Commence of the second control of the		

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Your PRIORITY Unsecured Claims — Continuation Page Part 1:

		15 150 8 1	amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply Contingent	·.		
City State ZIP Code Who incurred the debt? Check one.	Unliquidated Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt	 Domestic support obligations Taxes and certain other debts you owe the government Claims for death or personal injury while you were intoxicated 			
Is the claim subject to offset? No Yes	Other, Specify			
Priority Creditor's Name	Last 4 digits of account number	ine (XXII-XXIII) in make make day to all the decision of the section decision.	n terres de la constante de la	
Number Street	When was the debt incurred?			
Street	As of the date you file, the claim is: Check all that apply.			
	☐ Contingent			
City State ZIP Code	☐ Unfliquidated ☐ Disputed			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated Other. Specify			
s the claim subject to offset?				
No Yes				
	Last 4 digits of account number	to the desiration was an end and personal condition of proper personal conditions of the personal cond	one emperation and experience of the entire ent	Site of the State of State of the State of State
riority Creditor's Name		\$\$_	\$_	
umber Street	When was the debt incurred?			1
	As of the date you file, the claim is: Check all that apply.			
ty State ZIP Code	Contingent Unliquidated			to you command transfer
ho incurred the debt? Check one.	☐ Disputed			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			· View
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government ☐ Claims for death or personal injury while you were intoxicated			4
Check if this claim is for a community debt	Other. Specify	aline kenera kelanggan pengangan pengangan kelanggan pengangan beranggan pengangan beranggan pengangan berangg	indiani, visitat stancia in C.S. V. S. attentio	
the claim subject to offset? No Yes				

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b	anyzis List All of Your NUNPRIORITY Unsecured Claims		
3.	Do any creditors have nonpriority unsecured claims against you	,2	
	□ No. You have nothing to report in this part. Submit this form to the ☐ Yes		
4.	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, I claims fill out the Continuation Page of Part 2.	1 FOI each claim listed identify what type of claim it is. Do no	as more than one
41	7 0 - 1 0 0 00	1 - 0	Total claim
7. 1	Nonpriority Creditor's Name	Last 4 digits of account number 4 3 4 1	1/25/
	Po Box 98223 8	When was the debt incurred?	\$1,078
	C10650 TX 79956-123	<	
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	With a intercept of the July 2011	☐ Contingent	
	Who incurred the debt? Check one. Debtor 1 only	Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of MONDBIODITY	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		Student loans	
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the clarm subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	5
	G Ko	Other Specify Cody Carol	
	Yes		
2	C-mante a le la Walk of	Last 4 digits of account number _ / 7 4	\$ 4.54
	Nonpnority Creditor's Name	When was the debt incurred?	\$ <u>0-0 1</u>
	@ gox 1x27K9		
	Number Street		
	COLUMBUS GH YBLIX	As of the date you file, the claim is: Check all that apply.	!
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Onliquidated	
	Debtor 1 only	☐ Disputed	
	Debtor 2 only	Time of MOMPHODISM	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	, , , , , , , , , , , , , , , , , , ,
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	į
	Q No	1 Other. Specify real Carel	
	☐ Yes		
,]		Manusch with the contract of Chicagon (and a contract of the c	
	Nonpriority Creditor's Name	Last 4 digits of account number	s 1.195
	USO 9 22 rd St	When was the debt incurred?	
	Number Street		
	Lonsard II 60148	As of the date you file, the claim is: Check all that apply.	
			i
	The Arcairea the debt? Check one.	Contingent)
	Deptor 1 only	☐─ Unifiquidated ☐─ Disputed	
	Debter 2 only	- Disputed	; !
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	4 = 1
	Acted to the of the deplots and another	☐ Student loans	4
	Chook if this slaim is far a same to the day	Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims	
	□ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify <u>Cred.+ Cards</u>	Apple
			i i

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-	-	: 4		•	a	н

Your NONPRIORITY Unsecured Claims — Continuation Page

After lis	sting any entries on this page, number them beginning with 4	1.4, followed by 4.5, and so forth.	Total claim
Nor	Bloom PLC apriority Creditor's Name	Last 4 digits of account number $\frac{1}{2}$	\$ <u>3000</u>
Nur	16 50 X 18 27 8 9, hoper Street	When was the debt incurred?	
46	\$ COWMBUS OH, 43218	As of the date you file, the claim is: Check all that apply.	
G. G. G.	Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt the claim subject to offset?	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify	
	omenity Carle (VCN TrsseC	Last 4 digits of account number 5 6 8 3	\$ <u>1800</u>
None	phonity Creditor's Name 7 3214 - 27Kg	When was the debt incurred? [2413	
Num	Der Street OH. 4321X	As of the date you file, the claim is: Check all that apply.	
City	State ZIP Code	Contingent	
Who	incurred the debt? Check one.	☐ Unfiguidated☐ Disputed	4
	Sebtor 1 only	- Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	1
	At least one of the debtors and another	Student loans Obligations arising out of a separation agreement or divorce that	ļ
Q (Check if this claim is for a community debt	you did not report as priority claims	1
	e claim subject to offset?	Debts to pension or profit-sharing plans, and other similar debts	
	-	Other Specify Card Card	
Q Y	es		
Nonpr Numb	GCCL Galleria Jewell igity Creditor's Name D Bo X 1445 er Street Street OR 97076 State ZIP Code	Last 4 digits of account number	\$
Who	incurred the debt? Check one.	U-thliquidated	
	ebtor 1 only	☐ Disputed	400
🛄 p	ebtor 2 only	Type of NONPRIORITY unsecured claim:	;
	ebtor 1 and Debtor 2 only Heast one of the debtors and another	☐ Student loans	į
		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	9
	heck if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
Is the		Other. Specify (calif Costa	hancompanden exhibit
	The second secon		

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Fist Name Middle Name Last Name Page 30 of 76

Last Name Last Name Page 30 of 76

Part 3:

List Others to Be Notified About a Debt That You Already Listed

	sons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	☐ Part 2: Creditors with Nonpriority Unsecured Claims
	Last 4 digits of account number
City State ZIP Code	
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
Number Street	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Sueer Sueer	Claims Part 2: Creditors with Nonpriority Unsecured
City State ZIP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZiP Code	Last 4 digits of account number
Name	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Street	Part 2: Creditors with Nonpriority Unsecured Claims
City State ZIP Code	Last 4 digits of account number
Harme	On which entry in Part 1 or Part 2 did you list the original creditor?
raine	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
iumber Street	Part 2: Creditors with Nonoriority Unsecured
	Claims
ity State ZIP Code	Last 4 digits of account number
ame	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	Claims Part 2: Creditors with Nonpriority Unsecured
ity State ZiP Code	Last 4 digits of account number
ane	On which entry in Part 1 or Part 2 did you list the original creditor?
	Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
umber Street	Claims
y State ZIP Code	Last 4 digits of account number
. State Air Code	——————————————————————————————————————

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

Total claim

Total claims from Part 1

- 6a. Domestic support obligations
- Taxes and certain other debts you owe the government
- 6c. Claims for death or personal injury while you were intoxicated
- Other. Add all other priority unsecured claims.
 Write that amount here.
- 6e. Total. Add lines 6a through 6d.

- 1171
- 6b. •
- 6c.
- 6d. +s 7,943,10
- 6e. \$ 9,113,100

Total claims from Part 2

- 6f. Student loans
- 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims
- 6h. Debts to pension or profit-sharing plans, and other similar debts
- Other. Add all other nonpriority unsecured claims. Write that amount here.
- 6j. Total. Add lines 6f through 6i.

Total claim

- 6f. s 1/0,000 00
- 6g. \$____
- 6h. s
- 0′ 1
- 6j. /00,000.07

Fill ichis information to identify your case:	Tited 00/07/19	:48:42 Desc Main
Distort Valencia lashan		
Deptor 1 VC TA WO-W Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name Middle Name	<u> </u>	
	Last Name	
United States Bankruptcy Court for the:Di	strict of	_
Case number (If known)		Check if this is an
		amended filing
Official Form 106E/F		
Schedule E/F: Creditors \	Nho Have Unsecured Clair	
A/B: Property (Official Form 106A/B) and on Scheceditors with partially secured claims that are list	It 1 for creditors with PRIORITY claims and Part 2 for unexpired leases that could result in a claim. Also in dule G: Executory Contracts and Unexpired Leases led in Schedule D: Creditors Who Have Claims Secu- the entries in the boxes on the left. Attach the Contumber (if known).	ist executory contracts on Schedule (Official Form 106G). Do not include any
Part 1: List All of Your PRIORITY Unsecu	red Claims	
1. Do any creditors have priority unsecured clain	ns against you?	
No. Go to Part 2.		
□		
nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of	reditor has more than one priority unsecured claim, list if a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's report 1. If more than one creditor holds a particular claim	nat claim here and show both priority and
(For an explanation of each type of claim, see the	instructions for this form in the instruction booklet.)	
		Total claim Priority Nonpriority
1 Pro 14 1/2 1	m (1 a 1	amount amount
Priority Creditor's Name	Last 4 digits of account number 5 4 6	s 17,091 s s
450 E 22 nd St	When was the debt incurred? $3/02//2$	
Number Street	, ,,	
lon bard II 60148	As of the date you file, the claim is: Check all that apply	y .
City State ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only Debtor 2 only	·	
Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Domestic support obligations	
Check if this claim is for a community debt	Taxes and certain other debts you owe the government	
Is the elaim subject to offset?	Claims for death or personal injury while you were intoxicated	
☑ No	Other. Specify CRUIT Carcf	
☐ Yes		
Dept of Nel net	Last 4 digits of account number 75 &	Para Articum, de distribution de principal de maior de principal de pr
Priority Creditor's Name 3015 Number Street Park es KD Suite	When was the debt incurred? $\frac{7/6}{10}$	\$\$
-A	As of the date you file, the claim is: Check all that apply	
AU1019, (D, 800/4	Contingent	
City State ZIP Code	Unliquidated	
Who incurred the debt? Check one.	☐ Disputed	
Debtor 1 only	Type of PRIORITY unsecured claim:	To the state of th
Debtor 2 only Debtor 1 and Debtor 2 only	Domestic support obligations	***************************************
At least one of the debtors and another	Taxes and certain other debts you owe the government	
Check if this claim is for a community debt	Claims for death or personal injury while you were	
_	intoxicated (/ / / /	
Is the claim subject to offset? ☐ No	Other. Specify 2 HUSEN + 104 N	
Yes		
	the state of the s	

ar(1: Your PRIORITY Unsecured Claims				
fter listing any entries on this page, number them	beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Dept of FA Palart	Last 4 digits of account number 6 4 1	\$	s	\$
Priority Creditor's Name 3015 Parks (d Suste 40	<u>~ []</u>	¥	*	Ψ
Number Street	When was the debt incurred? $\frac{\mathcal{D}[\mathcal{U}][0]}{\mathcal{U}[0]}$			
1 116	As of the date you file, the claim is: Check all that apply.			
City Cora CO State ZIP Code	Contingent Disputed			
Who incurred the debt? Check one.	Toward BRIGRITY			
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated Deather. Specify 5-Holest 1045			
Is the claim subject to offset?	biner. Specify 54 000 51. 104A			
1-140				
Yes				
Dept of Ed/Nellet	Last 4 digits of account number 5 1 8 5	\$	\$	\$
Priority Creditor's Nator 3013 Jacker Rollsuite 4018 Number Street	When was the debt incurred? 8/14/1/			
	As of the date you file, the claim is: Check all that apply.			
Augus CO. Van 14	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	☐ Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify 5 the first 10913			
is the claim subject to offset?				
O No				
Pes		itä eti omes nyövetä kasoonavet esikä alvasemisestyssen	e de Novembrus en	t and the state of
Proving Creditor's Marine,	Last 4 digits of account number $\frac{7}{2}$	\$	\$	\$
Number Street Red Suite 400	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
Avera (10 Kaply)	Contingent			
City State ZIP Code	Unliquidated			
***	☐ Disputed			
Who incurred the debt? Check one.				
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated	enn 10 for in 1980 est askabella stempetit stempetitude	el-Maile (1916) i de co-adelite bediene anticolor de color	lantane antilesane, lessant propuns, na sangén, a
le the claim cubicet to eff-19	Other Specify 5 HURENT /Q113			
Is the claim subject to offset?				
☑ No ☐ Yes		-		

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Part 2:

List All of Your NONPRIORITY Unsecured Claims

	Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the Yes		
	List all of your nonpriority unsecured claims in the alphabetical or nonpriority unsecured claim, list the creditor separately for each claim, ncluded in Part 1. If more than one creditor holds a particular claim, lis claims fill out the Continuation Page of Part 2.	der of the creditor who holds each claim. If a creditor has For each claim listed, identify what type of claim it is. Do not	more than one list claims already
4.1	Dept of Ed / NeInth Nonpriority Greditor & Name 3015 Parket Rd Sutte 480	Last 4 digits of account number $\frac{6}{8}$	Total claim
	Number Street AWOS A CO State RIP Code	As of the date you file, the claim is: Check all that apply.	
	Who fincurred the debt? Check one. Debtor 1 only Debtor 2 only	Disputed	
	Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
4.2	□ No □ Yes	Other. Specify Last 4 digits of account number	: 3V (15)
	Nonpriority Creditor's Name P.O. BUX 660364 Number Street	When was the debt incurred? As of the date you file, the claim is: Check all that apply.	* <u> </u>
	City State ZIP Code Who incurred the debt? Check one. Upebtor 1 only	Contingent Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension of profit-sharing plans, and other similar debts Other. Specify 	
4.3	Nonpriority Creditor's Name	Last 4 digits of account number $\frac{5915}{2081100}$	s_/170
	City State ZIP Code	As of the date you file, the claim is: Check all that apply.	
	Who inclired the dent? (Theck one	Contingent Uniliquidated Disputed	:
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: Student loans	
	Is the claim subject to offset?	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify 	

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Your NONPRIORITY Unsecured Claims — Continuation Page

Nonpriority Creditor's Name Number Street City State 2TP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Onliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit sharing plans, and other similar debts Other. Specify (Coult Coult)	63.00
As of the date you file, the claim is: Check all that apply. Contingent Contin	143.00
City State ZIP Code Contingent Onliquidated Disputed Type of NONPRIORITY unsecured claim: Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	143.00
Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes	163.00
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit sharing plans, and other similar debts Other. Specify (**CUT*** CIVICA***)	163.00
Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit sharing plans, and other similar debts Other. Specify Other. Specify	163.00
☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes	163,00
Is the claim subject to offset? No Yes	1 <u>63.00</u>
Yes	143,00
I will time Last 4 digits of account number 7 9 5 2	143.00
1 1/10/10/1/ FUIVIIIA	
Nonpriority Creditor's Name 2365 Whith Side Drive Suite 300 When was the debt incurred? 2/2/6/18	
Number Street As of the date you file, the claim is: Check all that apply.	
City State ZiP Code A Contingent Unliquidated	:
Who incurred the debt? Check one. Disputed Disputed	
Debtor 2 only Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ✓	
☐ Check if this claim is for a community debt ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify (**CUT** (**CUT**) (**CUT** (**CUT**) (**CUT**) (**CUT**) (**CUT**) (**CUT** (**CUT**) (**CUT**) (**CUT** (**CUT**) (**C	
Other: Specify (12411 C 41 4) Pres	
Calfal One Auto Finger Last 4 digits of account number 1944 \$1	7248
Nonprojity Creditor's Name When was the debt incurred? 3/20/2004	:
Number Street TX 75015 As of the date you file, the claim is: Check all that apply.	:
City State ZIP Code Contingent Unliquidated	:
Who incurred the debt? Check one. Disputed Disputed	:
☐ Debtor 2 only Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only At least one of the debtors and another Student loans Obligations arising out of a separation agreement or divorce that	
you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset? No Yes	

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First Name Middle Name Document Page 36 of 76

Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name ___ of (Check one): Deart 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ____ __ City State ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ _ City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line ____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Street Part 2: Creditors with Nonpriority Unsecured Last 4 digits of account number ____ _ State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ______ State ZIP Code City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ __ ___ City ZIP Code On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Street Number Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ ___ ZIP Code State City On which entry in Part 1 or Part 2 did you list the original creditor? Name Line _____ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Last 4 digits of account number ___ _ ZIP Code City State

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim	
Total claims	6a. Domestic support obligations	6a. s 70910	
from Part 1	6b. Taxes and certain other debts you owe the government	6b. <u>\$</u>	
	6c. Claims for death or personal injury while you were intoxicated	6c. <u>\$</u>	
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +\$ 57,996.U	0
	6e. Total . Add lines 6a through 6d.	6e. s 75,087	
		Total claim	
Total claims	6f. Student loans	6f.	
from Part 2		\$	
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$	
	or divorce that you did not report as priority	\$	
	or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other	6g. \$	

F	ill in b his	Case 18-22177 information to identify y		Filed	08/07/18	Entered 08/07/ of 76	18 13:48:42	Desc Main
15,	ebtor 1	Valencia	lasha	IJΛ	lunch			
	ebtor 2	First Name	Middle Name		Last lame			
		g) First Name	Middle Name		Last Name			
U	nited State	s Bankruptcy Court for the: _	D	istrict of _				
	ase numbe f known)	T						☐ Check if this is an amended filing
0	fficial	Form 106E/F						
S	ched	ule E/F: Cre	ditors '	Who	Have U	nsecured (Claims	12/15
List A/E cre nee any	t the other iditors with eded, cop addition	er party to any executory fy (Official Form 106A/B) th partially secured clain	y contracts or and on Sche ms that are lis it out, numbe me and case r	r unexpiredule G: I sted in So er the ent number (i	ed leases that of Executory Con chedule D: Creaties in the boxen if known).	could result in a claim tracts and Unexpired i ditors Who Have Clain	. Also list executo Leases (Official For as Secured by Prop	with NONPRIORITY claims. ry contracts on Schedule rm 106G). Do not include any perty. If more space is ge to this page. On the top of
1.	Do any e	reditors have priority un	nsecured clai	ms again	st you?			
		o to Part 2.						
er er er er	Yes.	f your priority unsecure	d claims. If a	creditor h	as more than or	ne priority unsecured cla	sim. list the creditor	separately for each claim. For
	each clair	n listed, identify what type	of claim it is.	If a claim	has both priorit	v and nonpriority amour	nts. list that claim he	re and show both priority and have more than two priority
	unsecure	d claims, fill out the Contir	nuation Page (of Part 1.	If more than one	e creditor holds a particu	ular claim, list the oth	ner creditors in Part 3.
	(For an e	xplanation of each type of	claim, see the	e instructi	ons for this form	in the instruction bookl	et.) Total cla i	m Priority Nonpriority
	1							amount amount
2.1	<u> </u>	P-05-1		Last	4 digits of acco	unt number	\$	\$\$ <u></u> \$
	Priority Cr	editor's Name		Wher	n was the debt in	ncurred?		
	Number	Street						
	***************************************					e, the claim is: Check all	that apply.	
	City	State	ZIP Code		ontingent			
	Who inc	urred the debt? Check one).		nliquidated isputed			
	Debte	or 1 only		را اسا	Isputed			
	Debte			Type	of PRIORITY U	insecured claim:		
		or 1 and Debtor 2 only		O D	omestic support o	bligations		
	☐ At lea	ist one of the debtors and and	other			other debts you owe the go	vernment	
	☐ Chec	k if this claim is for a con	amunity debt					
	le the el					personal injury while you w		
	_	aim subject to offset?		in	toxicated		/ere	
2.2	☐ No	-		in o	toxicated ther. Specify		vere	
	_	-	i kirindi risiyaninkaliya istan ka di Bali fad Millishiyi danin gariba istan gariba istan gariba istan gariba i	in O	toxicated ther. Specify	n i liin shikus lakela jaglanga kalla karaka kalla karaka kanan ka kanan kalaka kanan kalaka kanan ka ka	Pere	
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	No Yes	Topen) svjendjala žinda kravatila kravatila kravatila kravatila svjenda odlava svjetska svjetska svjetska svje		Last 4 When	toxicated ther. Specify digits of accou	unt number	**************************************	
	No Yes	rigente cianti si liberte cianti si liberte cianti si cana si c dittor's Name		Last 4 When	toxicated ther. Specify digits of accou was the debt in	Introduction folder relations are a second and a second a	**************************************	
	No Yes	rigente cianti si liberte cianti si liberte cianti si cana si c dittor's Name	ZIP Code	Last 4 When	toxicated ther. Specify digits of accounts was the debt in the date you file	unt number	**************************************	
	Priority Cre	iditor's Name	ZIP Code	Last 4 When As of	toxicated ther. Specify digits of accou was the debt in	unt number	**************************************	
	Priority Cre	Street State urred the debt? Check one	ZIP Code	Last 4 When As of	toxicated ther. Specify digits of accounts was the debt in the date you file ontingent inliquidated sputed	e, the claim is: Check all	**************************************	
	Priority Cre Number City Who inc Debtc	Street State wrred the debt? Check one or 1 only or 2 only	ZIP Code	Last 4 When As of	toxicated ther. Specify 4 digits of account was the debt in the date you file ontingent inliquidated isputed of PRIORITY u	ant number	**************************************	
	Priority Cre Number City Who inc Debtc Debtc Debtc	Street State wrred the debt? Check one or 1 only or 2 only or 1 and Debtor 2 only	ZIP Code	Last 4 When As of	toxicated ther. Specify 4 digits of account was the debt in the date you file ontingent inliquidated isputed of PRIORITY unprestic support of	e, the claim is: Check all	that apply.	
	Priority Cre Number City Who inc Debto Debto At lea	Street State Wrred the debt? Check one or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and ano	ZIP Code other	Last 4 When As of Ut Di Type Tree	toxicated ther. Specify 4 digits of account was the debt in the date you file ontingent inliquidated sputed of PRIORITY und mestic support of exes and certain of	unt number	that apply.	
	Priority Cre Number City Who inc Debto Debto At lea	Street State wrred the debt? Check one or 1 only or 2 only or 1 and Debtor 2 only	ZIP Code other	Last 4 When As of Ut Di Type Type C Tre C C C C C C C C C C C C C C C C C C C	toxicated ther. Specify 4 digits of account was the debt in the date you file ontingent inliquidated sputed of PRIORITY und mestic support of exes and certain of	e, the claim is: Check all	that apply.	
	Priority Cre Number City Who inc Debtc Debtc At lea	Street State Wrred the debt? Check one or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and ano	ZIP Code other	Last 4 When As of United Diagrams Type Diagrams Tight City City City City City City City Cit	toxicated ther. Specify 4 digits of account was the debt in the date you file ontingent inliquidated sputed of PRIORITY understood account was and certain of a death or loxicated	unt number	that apply.	
n. ć	Priority Cre Number City Who inc Debtc Debtc At lea	Street State urred the debt? Check one or 1 only or 2 only or 1 and Debtor 2 only st one of the debtors and ano k if this claim is for a com	ZIP Code other	Last 4 When As of United Diagrams Type Diagrams Tight City City City City City City City Cit	toxicated ther. Specify 4 digits of account was the debt in the date you file ontingent inliquidated sputed of PRIORITY understood account was and certain of a death or loxicated	unt number	that apply.	

r listing any entries on this page, number then	n beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriori amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply			
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
 At least one of the debtors and another Check if this claim is for a community debt 	Claims for death or personal injury while you were intoxicated			
	Other. Specify			
Is the claim subject to offset?				
□ Yes				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
	When was the debt incurred?			
Number Street	All for the second and the second an			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	☐ Contingent☐ Unliquidated			
	Disputed			
Who incurred the debt? Check one.				
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
s the claim subject to offset?	Other. Specify			
No				
2 Yes Esta managataran dena managan ana managan da da managan da da managan da managan da managan da managan da managan da da managan da da managan da da managan	$a \ \ b \ \ column \$	entidense vilantianiskus einankine einankine) operlijense vila inlinans och militaris	ini kan kantuu muuta kantuuri ka	entillet i si illustra pinetjigan, prijosegan
riority Creditor's Name	Last 4 digits of account number	\$	\$	S
umber Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
	Contingent			
ity State ZIP Code	Unliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only	Taxes and certain other debts you owe the government			
At least one of the debtors and another	Claims for death or personal injury while you were intoxicated			
Check if this claim is for a community debt	Other. Specify	ન તત્વારા ત્વારા કરવાની કરાવે ત્યારા કરવાની કહ્યા કરે કહ્યા છે. તેને કહ્યા કરો હતા હતા કરવાની કહ્યા કહ્યા કરે ત્યારા કર્યા ક	landere der der de	teribetiaethuettyrefadiyya,eyeleyeyae
the claim subject to offset? I No				

Dart 2: List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the Yes		
	List all of your nonpriority unsecured claims in the alphabetical or nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, li claims fill out the Continuation Page of Part 2.	order of the creditor who holds each claim. If a creditor has. For each claim listed, identify what type of claim it is. Do not	more than one list claims already
14.			Total claim
1,1	1 (iti Student loun Cost 8	Last 4 digits of account number 7 883	11/2
	Nonpriority Creditor's Name	When was the debt incurred?	
	Number Street OTT CCT NOTE N	8/30/1009	φ
	Sioux Palls 5 5 1/0/	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Who incurred the debt? Check one. Debtor 1 only	☐ Unliquidated ☐ Disputed	
	Debtor 2 only	- Disputed	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	Ustudent loans Obligations arising out of a separation agreement or divorce	
	Check if this claim is for a community debt Is the claim subject to offset?	that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
	Yes		
.2	5 YNCB/Watmart	Last 4 digits of account number 25	\$ 1,662
	Nonpriority Creditor's Hamel	When was the debt incurred? 116115	•
	Number Street	As of the data was file the elements (be death)	
	Orlando FL 5024 City State ZIP Code	As of the date you file, the claim is: Check all that apply. Contingent	
	Who incurred the debt? Check one.	Unflquidated	
	Deebtor 1 only	☐ Disputed	\ }
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	:
	At least one of the debtors and another	Student loans	:
	☐ Check if this claim is for a community debt	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset?	Debts to pension or profit-sharing plans and other similar debts Other. Specify CCAN (a)	
	☐ Yes	Other, Specify Create Code	
.3	Great America, Finance Holdins	Last 4 digits of account number U 1 9 0	1 411 1
	Nonpriority Creditor's Name	When was the debt incurred?	\$ 114
	Nuppler Street		;
	Chicago + Colodo State ZIP Code	As of the date you file, the claim is: Check all that apply.	: :
	Who incurred the debt? Check one.	☐L Contingent	:
	Debtor 1 only	Disputed	:
	Debtor 2 only Debtor 1 and Debtor 2 only		
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	:
	☐ Check if this claim is for a community debt	Student loans Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?	that you did not report as priority claims Debts to pension or profit-sharing plans and other similar debts	
	Ŭ No □ Yes	Debts a person of profit-straining plans and other similar debts Debts a person of profit-straining plans and other similar debts Creat Case	
	₩ 105		

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Your NONPRIORITY Unsecured Claims - Continuation Page

Afte	r listing any entries on this page, number them beginning with 4.4	, followed by 4.5, and so forth.	Total claim
		71	
	Convergent contouring	Last 4 digits of account number	s 575
	Nonperiority Creditor's Name	1/1-/2-12	\$ <u></u>
	400 5W 39+	When was the debt incurred? // Lo Lo	
	Number Street		
	Rentan WH 1805)	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Deoxingent	
		Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only	·	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	☐ At least one of the debtors and another		
		 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	is the plaim subject to offset?	Other. Specify Phone Dill	
	□ No	- Ones, opening 1 *//(O'tt	
	Yes		
	₩ Yes		
	1 化氢离子 化四十分 电子 化二氢 化氢离子 化氯化异子 化氯化异子 化氯化异子 化氯化异子 化二甲甲基乙基 化氯化氢 化氢化氢 化氢化氢化氢化氢化氢化氢化氢 化氢化氢化氢化氢化氢化氢化氢		manamente es estados es estados es estados en estados en estados en estados en el consecuente de estados en el
- 1	Die odi a d	(, , (,)	2/3/
	1155an Motor Arrestance	Last 4 digits of account number 4	\$01,00
	Nonpriority Creditor's Name	2/13/10/0	
	PO BOX 660366	When was the debt incurred?	
	Number Street		
	Dalla 5 7x 15211	As of the date you file, the claim is: Check all that apply.	
	City State ZIP Code	Contingent	
		☐ Unliquidated	
	Who incurred the debt? Check one.	☐ Disputed	
	Debtor 1 only		
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		
	At least one of the debtors and another	Student loans	
	_	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	Check if this claim is for a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify Car 104 h	
	₩No	OBIG. OPEGINY	
	Yes		
	Tes .		
	valuasias es esperanta a manumente es de escrever num comentario metande de la principa de la principa de la p A	and internal control of the control	19145
	11 St. Mal. C Aughola	Last 4 digits of account number $\underline{\mathcal{Y}}\underline{\mathcal{Y}}\underline{\mathcal{O}}\underline{\mathcal{O}}$	\$ <u>~ </u>
	1135an Motor Amptiale	1/1/12	•
	Nonpriority Creditor's Name 20,2 BOX 660366	When was the debt incurred? 8/9//3	
	TO GOX GROJER		
	Númber Street	As of the date you file, the claim is: Check all that apply.	
	Dallas 7k 13296	Elle o	
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	Onliquidated	
		Disputed	
	Debtor 1 only	Time of NONDBIODITY	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	☐ Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims	
	·	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify CAT /OGA	
	No		
	☐ Yes		

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Part 3:

List Others to Be Notified About a Debt That You Already Listed

			On which entry in Part 1 or	r Part 2 did you list the original creditor?
Name			on whom only mr. are room	Trait is and you not the original distance.
			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured Cla
	Are transmission to the the the the the transmission of the transm		Last 4 digits of account nu	mber
City	State	ZIP Code	Stark A primary and primary to the contract of the primary and the contract of	
Name			On which entry in Part 1 o	r Part 2 did you list the original creditor?
warne			Line of (Check one)	Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			Claims	
City	State	ZiP Code	Last 4 digits of account nu	umber
Name			On which entry in Part 1 o	r Part 2 did you list the original creditor?
raine			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claim
Number	Street			Part 2: Creditors with Nonpriority Unsecured
			Claims	
City	State	ZIP Code	Last 4 digits of account nu	umber
			On which entry in Part 1 o	r Part 2 did you list the original creditor?
Name			Line of (Check one):	Part 1: Creditors with Priority Unsecured Claim
Number	Street	***************************************		Part 2: Creditors with Nonpriority Unsecured
			Claims	
City	State	ZIP Code	Last 4 digits of account nu	umber
The fundamental entire fundament and a	ed militeren (somford men militeres possibility en de dregte met trags produktions film de en militere de film	rangst dit darkangs och på och mann socialise van tiller kvet med verd	On which entry in Part 1 or	r Part 2 did you list the original creditor?
Name				Don't 4: Condition with Driving the University Chine
Number	Street		Line of (Check one):	Part 1: Creditors with Priority Unsecured Claim Part 2: Creditors with Nonpriority Unsecured
			Claims	art 2. Orealtors with Nonphority Onsecuted
City	State	ZIP Code	Last 4 digits of account nu	ımber
	ui z z zemzyny na tro pod zie i zerob od imme i ziema i ziema i ziema za kanana pomorpog do od zie ziem groß diadat (Company) ziema z	emajorium Paul militari Bakarinin (d. 1400-1404), 47 (240-24), 14-22-147	On which entry in Part 1 or	r Part 2 did you list the original creditor?
Vame			Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street		and or (order ord).	Part 2: Creditors with Nonpriority Unsecured
			Claims	
City	State	ZIP Code	Last 4 digits of account nu	
Name			On which entry in Part 1 or	r Part 2 did you list the original creditor?
			Line of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
Number	Street			☐ Part 2: Creditors with Nonpriority Unsecured

First Name Middle Name Document

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Part 4:

Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

		Total claim
Total claims	6a. Domestic support obligations	6a. _{\$}
from Part 1	6b. Taxes and certain other debts you owe the government	6b.
	6c. Claims for death or personal injury while you wer intoxicated	6c. \$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. +s 54,975
	6e. Total. Add lines 6a through 6d.	6e. \$_54,975
		Total claim
Total claims	6f. Student loans	6f. \$
from Part 2	6g. Obligations arising out of a separation agreemen or divorce that you did not report as priority claims	t 6g. \$
	6h. Debts to pension or profit-sharing plans, and othe similar debts	er 6h. _{\$}
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + §
	6j. Total. Add lines 6f through 6i.	6j. s

	Case 18-22177 Doc 1 Fill in this information to identify your case:	Filed 08/07/18	Entered 08/07/18 13: of 76	48:42	Desc Main	
	Debtor 1 Y OKOC 2 Process	Las Name	- 			
	Debtor 2 Spouse, if filing) First Name Middle Name	Last Name				
l	United States Bankruptcy Court for the:Di	strict of				
c	Case number If known)					eck if this is an ended filing
0	fficial Form 106E/F					
S	chedule E/F: Creditors \	Who Have L	Insecured Clain	ns		12/15
A/E cre nec	as complete and accurate as possible. Use Past the other party to any executory contracts or B: Property (Official Form 106A/B) and on Scheeditors with partially secured claims that are listeded, copy the Part you need, fill it out, number y additional pages, write your name and case nurt 1: List All of Your PRIORITY Unsecu	unexpired leases that dule G: Executory Cor- ted in Schedule D: Cre- the entries in the box umber (if known).	could result in a claim. Also li- stracts and Unexpired Leases (ditors Who Have Claims Secur	st executor Official Form	y contracts on S m 106G). Do not erty if more spa	Schedule include any
1.	Do any creditors have priority unsecured clain	ns against you?				
	No. Go to Part 2.	- agamet your				
	List all of your priority unsecured claims. If a ceach claim listed, identify what type of claim it is. I nonpriority amounts. As much as possible, list the unsecured claims, fill out the Continuation Page of Cear an explanation of each type of claims.	f a claim has both priori claims in alphabetical o f Part 1. If more than on	ly and nonpriority amounts, list the rder according to the creditor's na e creditor holds a particular claim	at claim here	e and show both	priority and
,	(For an explanation of each type of claim, see the	instructions for this form	in the instruction booklet.)	Total clain	n Priority	Nonpriority
]				amount	amount
2.1	Priority Creditor's Name	Last 4 digits of acco	unt number	\$	\$	\$
	Thomy decides a Haine	When was the debt i	ncurred?			
	Number Street					
			le, the claim is: Check all that apply			:
	City State ZIP Code	Contingent Unliquidated				:
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of PRIORITY (insecured claim:			7
	Debtor 1 and Debtor 2 only	Domestic support of				
	At least one of the debtors and another		other debts you owe the government			
	☐ Check if this claim is for a community debt		personal injury while you were			
	Is the claim subject to offset?	intoxicated				
	☐ No☐ Yes					
.2	to the state of th		i da kalaman kal pilanga di kalika di kalimin terti milimin kalikan perlika pinangan perpada kang milingan di kang di kalimin per kang di kang			
	Priority Creditor's Name		unt number	\$	\$	_ \$
	Number Street	When was the debt in	ncurred?			
	Number Street	As of the date you fil	e, the claim is: Check all that apply.			•
		Contingent				
	City State ZIP Code	Unliquidated				
	Who incurred the debt? Check one.	☐ Disputed				2.5
	Debtor 1 only Debtor 2 only	Type of PRIORITY u	nsecured claim:			
	Debtor 1 and Debtor 2 only	Domestic support of				Whet lefters
	At least one of the debtors and another		ther debts you owe the government			
	☐ Check if this claim is for a community debt	Claims for death or intoxicated	personal injury while you were			
	Is the claim subject to offset?					
	□ No					## ## ## ## ## ## ## ## ## ## ## ## ##
	Yes					1

ter isting any entries on this page, number the	m beginning with 2.3, followed by 2.4, and so forth.	Total claim	Priority amount	Nonpriority amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent Uniliquidated			
Who incurred the debt? Check one.	Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	☐ Domestic support obligations			
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
•	Other. Specify			
Is the claim subject to offset?				
Yes				
Priority Creditor's Name	Last 4 digits of account number	\$	\$	erteten ten pennenen amanni amananan en
FIROTRY Creditor's Name	When was the debt incurred?			
Number Street	MARKET ST. ST. ST. ST. ST. ST. ST. ST. ST. ST			
	As of the date you file, the claim is: Check all that apply.			
City State ZIP Code	Contingent			
City State ZIP Code	Unliquidated Disputed			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	Type of PRIORITY unsecured claim:			
Debtor 2 only	Domestic support obligations			
Debtor 1 and Debtor 2 only At least one of the debtors and another	Taxes and certain other debts you owe the government			
	Claims for death or personal injury while you were			
☐ Check if this claim is for a community debt	intoxicated Other. Specify			
Is the claim subject to offset?				
□ No □ Yes				
	ann a margan starright of the start of the s			
Priority Creditor's Name	Last 4 digits of account number	\$\$	\$	
Number Street	When was the debt incurred?			
	As of the date you file, the claim is: Check all that apply.			:
	Contingent			
City State ZIP Code	☐ Unliquidated ☐ Disputed			Thurbus and the state of the st
Who incurred the debt? Check one.				
Debtor 1 only Debtor 2 only	Type of PRIORITY unsecured claim:			200
Debtor 1 and Debtor 2 only	Domestic support obligations			
☐ At least one of the debtors and another	Taxes and certain other debts you owe the government Claims for death or personal injury while you were			
Check if this claim is for a community debt	intoxicated	tti er i millimlist salt eller til ett salt salt salt salt salt salt salt sa	A NO STANCE OF THE STANCE STANCE OF THE STAN	
Is the claim subject to offset?	Other. Specify			
□ No				
☐ Yes				

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	м			

List All of Your NONPRIORITY Unsecured Claims

3.	Do any creditors have nonpriority unsecured claims against you No. You have nothing to report in this part. Submit this form to the		
1111	List all of your nonpriority unsecured claims in the alphabetical of nonpriority unsecured claim, list the creditor separately for each claim included in Part 1. If more than one creditor holds a particular claim, li claims fill out the Continuation Page of Part 2.	. For each claim listed, identify what type of claim it is. Do not	list claims already
4.1	City Student Dan COSP Nonpriority Creditor's Name 701 & Cuth Street North Number Street Sioux Falls 5 D 57/07 City State ZIP Code	Last 4 digits of account number $\frac{1}{8}$ $\frac{1}{3}$ $\frac{1}{3}$ When was the debt incurred? $\frac{1}{8}$ $\frac{1}{3}$ $\frac{1}{3}$ $\frac{1}{3}$ As of the date you file, the claim is: Check all that apply.	Total claim s 4 coo
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the etaim subject to offset? No Yes	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Ther. Specify	
1.2	Nonpriority Creditor's Name Number Street City State ZiPeede Who inpurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Last 4 digits of account number When was the debt incurred? As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim:	s 3], 9 ₂
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt is the claim subject to offset? ☐ No ☐ Yes	□ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify	
.3	Nonpriority Creditor's Name Po Sox Number Street Oclardo Ph 33 894 City State 28 Code	When was the debt incurred? As of the date you file, the claim is: Check all that apply.	\$ 100,00
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt	Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Is the claim subject to offset? No Yes	Debts to pension or profit-sharing plans and other similar debts Other. Specify (CO) + (CO)	

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Part 2:

Your NONPRIORITY Unsecured Claims — Continuation Page

Af	ter listing any entries on this page, number them beginning with 4	.4, followed by 4.5, and so forth.	Total claim
	Saute Mare Nonphority Creditor's Name	Last 4 digits of account number $\frac{100}{800}$:23,490
	Number Street	<u> </u>	
	WilMington DE 1980	As of the date you file, the claim is: Check all that apply. Contingent	
	Who incurred the debt? Check one. Debtor 1 only Debtor 2 only	Unliquidated Disputed Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt	 Obligations arising out of a separation agreement or divorce that you did not report as priority claims 	
	is the claim subject to offset?	☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify	
	SXALCA PART MA FURILIN	Last 4 digits of account number O	ina manini mana mana mana mana mana mana
	Nonprior ty Creditor's Name O CO COV 915036	When was the debt incurred? 1/17/16	4,191,10
	Number Street	As of the date you file, the claim is: Check all that apply.	
	city Clando the 32891	Contingent	
	Who jacurred the debt? Check one.	☐ Unliquidated ☐ Disputed	
	Debtor 1 only		
	Debtor 2 only Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	☐ Check if this claim is for a community debt Is the plaim subject to offset? ☐ No	you did not report as priority claims Debts to pension or profit-sharing plans and other similar debts Other. Specify (1721) (5)	
	☐ Yes		
	115 Orpt 10+ Education	Last 4 digits of account number 5 9 2 4	\$ <u>10,507</u>
	Nonpriority Creditor's Name 2 Pl international POR 7859	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	: :
	City State ZIP Code	Contingent	
	Who incurred the debt? Check one.	☐ ∕unliquidated ☐ Disputed	:
	Debtor 1 only Debtor 2 only		
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim: Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a community debt	you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset? No Yes	Other. Specify	Accept parties
	the first of the community of the commun	The state of the s	

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First Name Document Page 48 of 76

Part 3:

List Others to Be Notified About a Debt That You Already Listed

				On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			□ Part 2: Creditors with Nonpriority Unsecured Claim
				Last 4 digits of account number
City		State	ZIP Code	-
			·	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
City		State	ZIP Code	Last 4 digits of account number
ELANDELAMA PLANTAS PARIAS	oby CLANDOCH 4 APTILLAROUN SAMIORACHAN AN AC SUM SUMS AMAIN SAMIAN AN AC SUM SUMS AMAIN SAMIAN SAMIAN AN AC SU	ор жиран ромурон бол орогу орогу (14-1) доброму богу богу (14-1). Може богу богу	kamanan oleh persakel pendamikan bilangan pendulunya retimbur	On which entry in Part 1 or Part 2 did you list the original creditor?
lame				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street	***************************************		Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City sees of care on the section above	k, randisand regionere (resident dendis redandamagayet dibudh songete d	State.	ZIP Code	On which entry in Part 1 or Part 2 did you list the original creditor?
Name		, , , , , , , , , , , , , , , , , , , 		Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City	and a street of the second	State	ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
				Claims
City		State	ZIP Code	Last 4 digits of account number
Selfect Syring Syring Assessment	k portzi mitykkontanok izatratura zarona kontanten ekontanten kontanten kontanten kontanten kontanten kontante	eka kanan kanan kanan dara mengan kanan kenan kena Kenan kenan ke	andria etimokuminakankankenikank	On which entry in Part 1 or Part 2 did you list the original creditor?
Name				Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number	Street			Part 2: Creditors with Nonpriority Unsecured Claims
				Last 4 digits of account number
City	nd, produced to all assured by the common production and amount of amount of a figure of		ZIP Code	
Name				On which entry in Part 1 or Part 2 did you list the original creditor?
Number	Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured
			***************************************	Claims
			ZIP Code	Last 4 digits of account number

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Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			l otal claim
Total claims	6a. Domestic support obligations	6a.	\$
from Part 1	6b. Taxes and certain other debts you owe the government	6b.	\$
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	+s_4299.W
	6e. Total . Add lines 6a through 6d.	6e.	s 4299.0
			Total claim
Total claims	6f. Student loans	6f.	s 71,704
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$
	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	+ \$
	6j. Total. Add lines 6f through 6i.	6j.	s 71,70b

Case 18-22177 Doc 1 Filed 08/07/18 Entered 08/07/18 13:48:42 Desc Main Page 50 of 76 Document Fill in this information to identify your case: Debtor Debtor 2 (Spouse If filing) First Name Middle Name United States Bankruptcy Court for the: Northern District of Illinois Case number (If known) ☐ Check if this is an amended filing Official Form 106G Schedule G: Executory Contracts and Unexpired Leases 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known). 1. Do you have any executory contracts or unexpired leases? No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B). 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases. Person or company with whom you have the contract or lease State what the contract or lease is for Name Number Street City State ZIP Code Name Number Street State ZIP Code

2.1

2.2

2.3

2.4

2.5

City

Name

Number

City

Name

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City

Name

Number

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Street

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Street

State

State

State

ZIP Code

ZIP Code

ZIP Code

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Debtor 1

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Valuacia	mhaum	Document
First Name Middle Nam	le Last Name	101101

Case number (if known)

Person	or company	with whom yo	u have the contract or lease	What the contract or lease is for
Name				
Number	Street			
City		State	ZIP Code	
Name				
Number	Street			
City	Padakan Languaga	State	ZIP Code	The state of the s
Name			40	
Number	Street	···		
City	Orcet			
· · · · · · · · · · · · · · · · · · ·	والمعارضة	State	ZIP Code	interer on the second of the contract of the c
Name				·
Number	Street			
City		State	ZiP Code	
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Vame			100000000000000000000000000000000000000	·····
lumber	Street			_
City		State	ZIP Code	
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lame			The second secon	
lumber	Street			_
ity		State	ZIP Code	-
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umber	Street		8-767-2	
ty		State	ZIP Code	_

Number

Street

State

ZIP Code

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Debtor 1	Valmeu	lashaun	UMMA
	First Name	Middle Name	Last Name
Debtor 2			ı
Spouse, if filing)	First Name	Middle Name	Last Name
Inited States (Bankruptcy Court for the:	Northern District of Illino	pis

☐ Check if this is an amended filing

Official Form 106H

Schedule H: Your Codebtors

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

Arizona, California, Idaho,	Louisiana, Nevada, New Mexico, Puerto Ric	ate or territory? (Community property states and territories include to, Texas. Washington, and Wisconsin
No. Go to line 3.		
Yes. Did your spouse,	former spouse, or legal equivalent live with	ou at the time?
☐ No		
Yes. In which come	munity state or territory did you live?	. Fill in the name and current address of that person.
		or and porton.
Name of your spouse, for	ormer spouse, or legal equivalent	
Number Street		
Hamber Street		
City	State	ZIP Code
Column 1 liet all of va.	an and the confidence of	as a codebtor if your spouse is filing with you. List the person
chedule E/F, or Schedul	o to im out obtaining.	Column 2: The creditor to whom you owe th
chedule E/F, or Schedul	o to im out oblainly 2.	r), or Schedule G (Official Form 106G). Use Schedule D,
chedule E/F, or Schedul Column 1: Your codebtor	o to im out oblainly 2.	Column 2: The creditor to whom you owe the Check all schedules that apply:
chedule E/F, or Schedul Column 1: Your codebtor	o to im out oblaining 2.	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line
chedule E/F, or Schedul Column 1: Your codebtor	o to im out oblaining 2.	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street	o to im out oblaining 2.	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street		Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street		Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street Dity		Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line
Chedule E/F, or Schedul Column 1: Your codebtor Name Number Street Dity		Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street City Jame		Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule D, line Schedule B, line Schedule B, line Schedule B, line Schedule E/F, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street Sity Jame Jumber Street	State	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule G, line Schedule D, line Schedule G, line Schedule G, line
Chedule E/F, or Schedule Column 1: Your codebtor Name Number Street Dity Name Jumber Street	State	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code Schedule D, line Schedule G, line Schedule D, line Schedule G, line Schedule G, line
Chedule E/F, or Schedul Column 1: Your codebtor Name Number Street City Name Vumber Street	State	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line Schedule D, line Schedule G, line Schedule E/F, line Schedule E/F, line Schedule E/F, line Schedule D, line Schedule D, line
Schedule E/F, or Schedul Column 1: Your codebtor Name Number Street City	State	Column 2: The creditor to whom you owe the Check all schedules that apply: Schedule D, line Schedule E/F, line Schedule G, line ZIP Code ZIP Code ZIP Code

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Case number (if known)___

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the deb
7		Check all schedules that apply:
_	Name	Schedule D, fine
		☐ Schedule E/F, line
	Number Street	☐ Schedule G, line
_	City State	ZIP Code
_]	and the second s	ZIP Code
	Name	Schedule D, line
	Number Street	Schedule E/F, line
	Subde	Schedule G, line
Т	City State	ZIP Code
J	Name	Schedule D, line
		☐ Schedule E/F, line
	Number Street	Schedule G, line
1-	City State	ZIP Code
ì	Name	Schedule D, line
í	Number Street	Schedule E/F, line
		G Schedule G, line
Ç	ity State	ZIP Code
Ž.	lame	Schedule D, line
		Schedule E/F, line
N	lumber Street	☐ Schedule G, line
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Ñ	ame	Schedule D, line
		☐ Schedule E/F, line
Ni	umber Street	Schedule G, line
Çi	ty State	ZIP Code
		The state of the s
Na	me	Schedule D, line
Altri	mber Street	Schedule E/F, line
, 40	mber Street	Schedule G, line
Cit	y State	ZIP Code
		
Na	me	Schedule D, line
		I & Schodulo E/E line
	mber Street	Schedule E/F, line

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Fill in this information to identi	ify your case:				
Debtor 1 \frac{\infty}{\infty} M\frac{\infty}{\infty} U	lashoun	lunch			
First Name Debtor 2	Middle Name	Las Name			
(Spouse, if filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	e: Northern District of Illinoi	s			
Case number (If known)		_	1	k if this is:	
				n amended filing supplement showing postpetition chapte	40
Official Form 106l			in	come as of the following date:	3F 7 3
			M	M / DD / YYYY	
Schedule I: Yo				12/1	-
If you are separated and your sno	ouse is not filing with you te top of any additional pa	ning jonnsy, and	your spouse is living w	bebtor 2), both are equally responsible for ith you, include information about your s spouse. If more space is needed, attach a (if known). Answer every question.	ouse
Fill in your employment information.		Debtor 1		Debtor 2 or non-filing spouse	
If you have more than one job, attach a separate page with information about additional employers.	Employment status	Employed Not empl		☐ Employed	ACCORDANA SANTAN S
Include part-time, seasonal, or self-employed work.		- Not empi	oyeu ?	Not employed	
Occupation may include student	Occupation	SURPOR	b Specialist		
or homemaker, if it applies.	Employer's name	Atat		_	
	Employer's address	4512 1	WesterCourt	- CHAST	
	, .	Number Stree		Number Street	—

		1314	7		**
		City	State ZIP Code	City State ZIP Code	
	How long employed the	re? 9/13		Outo Zii Oode	
Part 2: Give Details About	Monthly Income		•		
Estimate monthly income as of		i. if you have noth	ning to report for any line.	write \$0 in the space. Include your non-filing	
spouse unless you are separated. If you or your non-filing spouse have below. If you need more space, att	ve more than one employe	r combine the inf			
	,	- , -, , , , ,	For Debtor 1	For Debtor 2 or	
List monthly gross wages, salar deductions). If not paid monthly, c	ry, and commissions (bef alculate what the monthly t	ore all payroll wage would be.	2. 3 5 0.000	non-filing spouse	
Estimate and list monthly overti			\$ <u></u>	\$ + \$	
Calculate gross income. Add line	e 2 + line 3.		4. \$ <u>3,500,00</u>	\$	and the state of t
the second section of the second of the seco			*		

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Case number (f known)

Debtor 1

Case number (if known)_

			For Debtor 1	For Debt	or 2 or	1945 Charles page and an
Copy line 4 here	→ 4	4.	8 <u>3500</u> 0~		The state of the s	•
5. List all payroll deductions:						•
5a. Tax, Medicare, and Social Security deductions	F.	a.	\$300.00	•		
5b. Mandatory contributions for retirement plans		b.	\$	- \$		
5c. Voluntary contributions for retirement plans	5		\$			
5d. Required repayments of retirement fund loans	5		\$			
5e. Insurance	56		\$ 10000	•		
5f. Domestic support obligations	5f		\$			
5g. Union dues	5 g	3	\$	- v		
5h. Other deductions. Specify:	5h	-	s 32	- · · · · · · · · · · · · · · · · · · ·		
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5			\$. \$		
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	. :	2,968	\$		
8. List all other income regularly received:						
 Net income from rental property and from operating a business, profession, or farm 						
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	0	\$	}	\$		
8b. Interest and dividends	8a. 8b.	·		*		
8c. Family support payments that you, a non-filing spouse, or a depend regularly receive	ent	\$		\$		
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$.	Mark	\$		
8d. Unemployment compensation	8d.	\$		\$		
8e. Social Security	8e.	\$		\$		
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistant that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	nce 8f.	\$		¢.	444	
8g. Pension or retirement income		*_		Ψ		
8h. Other monthly income. Specify:	8g.	\$_		\$		
***	8h. 1	+\$_		+\$		
Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$_		\$		
Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_		\$		\$
State all other regular contributions to the expenses that you list in Sched include contributions from an unmarried partner, members of your household, y friends or relatives.	L J. Our de	pend	ents, your room	mates, and other		1000
Do not include any amounts already included in lines 2-10 or amounts that are r	ot ava	ailable	e to pav expense	es listed in Sche	dula I	
opeony.					11, +	€.
Add the amount in the last column of line 10 to the amount in line 11. The range of the Add that amount on the Summary of Your Assets and Liabilities and Certain St	esult is atistica	s the	combined monti ormation, if it app	 hly income. plies	12.	\$
Do you expect an increase or decrease within the year after you file this fo	rm?					Combined monthly income
☐ Yes. Explain:						

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Fill in this information to identify	y your case:			
Debtor 1	IOMAGUA IUMO	1		
Pirst Name Debtor 2	Middle Name Lost Name	Check if the		
(Spouse, if filing) First Name	Middle Name Last Name	•	ended filing	4493
United States Bankruptcy Court for the:	District of		plement showing pos ses as of the followin	
Case number(If known)		MM / D	D / YYYY	
Official Form 106J				
Schedule J: Yo	ur Expenses			12/15
Be as complete and accurate as p information. If more space is need (if known). Answer every question	ossible. If two married people are fil led, attach another sheet to this forn	ing together, both are equally r n. On the top of any additional	responsible for supply pages, write your nam	ring correct
Part 1: Describe Your Hou	usehold			
1. Is this a joint case?				
☑ No. Go to line 2.☑ Yes. Does Debtor 2 live in a :	separate household?			
☐ No	le Official Form 106J-2, Expenses for S	Separate Household of Debtor 2.		
2. Do you have dependents?	□ No	1. man 1.11.000 (A.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1		
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
Do not state the dependents'	•	allanter		□ No
names.		Markanten	, 2	Yes
		- MUNGHINON		U No ☑ Yes
		_august	12	□ xo
				☑ Yes
		4444		☐ No ☐ Yes
				☐ No
			· · · · · · · · · · · · · · · · · · ·	Yes
3. Do your expenses include expenses of people other than yourself and your dependents?	No Yes			
Part 2: Estimate Your Ongoi	ng Monthly Expenses			
Estimate your expenses as of your	bankruptcy filing date unless you as kruptcy is filed. If this is a suppleme	re using this form as a supplenental <i>Schedule J</i> , check the box	nent in a Chapter 13 caracter that the top of the form	ase to report and fill in the
Include expenses paid for with non	-cash government assistance if you	know the value of	4.4.84	titi oo ah waxaa
	it on Schedule I: Your Income (Office		Your exper	ses
 The rental or home ownership early rent for the ground or lot. 	xpenses for your residence. Include	first mortgage payments and	4. \$_1,23	V. W
If not included in line 4:			١	<i>(</i> // <i>N</i>
4a. Real estate taxes			4a. \$	<u> </u>
4b. Property, homeowner's, or re			4b. \$ <u>X ().</u>	<u>W</u>
4c. Home maintenance, repair, a			4c. \$	$\omega_{}$
4d. Homeowner's association or	condominium dues		4d. \$	

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Debtor 1

Case number (if known)_

			Your expenses
	5. Additional mortgage payments for your residence, such as home equity loans	5.	S
	6. Utilities:		
	6a. Electricity, heat, natural gas	6а,	\$ 200.00
	6b. Water, sewer, garbage collection	6b.	
	6c. Telephone, cell phone, Internet, satellite, and cable services		\$ / > 5.00
	6d. Other, Specify:	6c.	\$ 2/0 20
	7. Food and housekeeping supplies	6d.	\$
	8. Childcare and children's education costs	7.	\$ 80.00
,	9. Clothing, laundry, and dry cleaning	8.	\$ 1/160.20
10	Personal care products and services	9.	\$ <u>/SDivo</u>
11	Medical and dental expenses	10.	\$ 150,00
12	_	11.	\$ 400.00
, -	Do not include car payments.	40	\$
13	3. Entertainment, clubs, recreation, newspapers, magazines, and books	12.	
14	and the second s	13.	\$ 260.05
15		14.	\$ 5200.00
	Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	45.	•
	15b. Health insurance	15a.	\$
	15c. Vehicle insurance	15b.	\$
	15d. Other insurance. Specify:	15c.	\$
		15d.	\$
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		
. 7		16.	\$
17.	Installment or lease payments:		
	17a. Car payments for Vehicle 1	17a.	\$ 540,00
	17b. Car payments for Vehicle 2	17b.	\$
	17c. Other. Specify:	17c.	\$
	17d. Other. Specify:	17d.	\$
8.	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		•
		18. \$	
	psychiatra you make to support others who do not live with you.		
	Specify:	19. \$	
Э.	Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Inc.	ome.	
	20a. Mortgages on other property		
	20b. Real estate taxes		
	20c. Property, homeowner's, or renter's insurance		
	20d. Maintenance, repair, and upkeep expenses		
	20e. Homeowner's association or condominium dues		
	• •	20e. \$_	

Debtor 1	Document Page 58 of 76 First Name Middle Name Last Name Case number (#7)	(nown)	
21. Other.	Specify:	21.	+\$
22. Calcula	te your monthly expenses.		
22a. Add	f lines 4 through 21.	22a.	\$ 12,503
22b. Co	by line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	22b.	\$
22c. Add	line 22a and 22b. The result is your monthly expenses.	22c.	\$ 12,303
			Legisland of the state of the s
	your monthly net income.		<u>\$ 350000</u>
	by line 12 (your combined monthly income) from Schedule I.	23a.	\$ 0,00,00
23b. Co _l	by your monthly expenses from line 22c above.	23b.	-\$ <u>(,777)</u>
	stract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$ 3,2>>
For examp	spect an increase or decrease in your expenses within the year after you file this form? ble, do you expect to finish paying for your car loan within the year or do you expect your payment to increase or decrease because of a modification to the terms of your mortgage? Explain here:		

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Fill in this information to iden	tify your case:			
Debtor 1	Inshawa lav			
First Name Debtor 2	Middle Name Last Name	Check if t	his is:	
(Spouse, if filing) First Name	Middle Name Last Name		nended filing	
United States Bankruptcy Court for t	he: Northern District of Illinois	☐ A supp	plement showing pos ses as of the following	stpetition chapter 13
Case number (If known)			DD / YYYY	ig date.
Official Form 106J-				
Schedule J-2:	Expenses for Sepa	arate Household	of Debtor	2 12/15
Use this form for Debtor 2's sep Debtor 2 have one or more depe only with respect to expenses for needed, attach another sheet to question.	parate household expenses ONLY IF I endents in common, list the dependent or Debtor 2 that are not reported on S this form. On the top of any addition	Debtor 1 and Debtor 2 maintain s nts on both Schedule J and this Schedule J. Be as complete and	separate households.	If Debtor 1 and
Part 1: Describe Your H	ousehold			
1. Do you and Debtor 1 maintain	separate households?			
No. Do not complete this Yes	form.			
2. Do you have dependents?	☐ No	en er skullend i summerskelverene en erkelvelvelvelvelvelvelvelvelvelvelvelvelve		A submitted and the submitted
Do not list Debtor 1 but list all other dependents of Debtor 2	Yes. Fill out this information for	Dependent's relationship to Debtor 2:	Dependent's age	Does dependent live with you?
regardless of whether listed as a dependent of Debtor 1 on Schedule J.	each dependent	Modern Constant and price representations for a good and constant and constant constant and cons	Miller Company of the	□ No □ Yes
Do not state the dependents'				□ No
names.				Yes
			*****	□ No □ Yes
				□ No
				☐ Yes
			annonico	□ No :
3. Do your expenses include expenses of people other than yourself, your dependents, and Debtor 1?	□ No □ Yes			U Yes .
		THE RELEASE TO THE PROPERTY OF		
	ing Monthly Expenses			
expenses as of a date after the ba	r bankruptcy filing date unless you a nkruptcy is filed.	re using this form as a supplem	ent in a Chapter 13 ca	se to report
Include expenses paid for with no	n-cash government assistance if you d it on <i>Schedule I: Your Incom</i> e (Offic	know the value of	Va a	: :
	expenses for your residence. Include		Your expen	Ses
any rent for the ground or lot.	•	morrisage payments and	4. \$	
If not included in line 4:				
4a. Real estate taxes			4a. \$	
4b. Property, homeowner's, or r			4b. \$	
4c. Home maintenance, repair,			4c. \$	
4d. Homeowner's association of	r condominium dues		4d. \$	

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Case number (# known)

				Your expenses
	5. Additiona	I mortgage payments for your residence, such as home equity loans	5 .	
	6. Utilities:			
	6a. Elec	iricity, heat, natural gas	6a.	\$
	6b. Wate	er, sewer, garbage collection	6b.	
	6c. Tele	phone, cell phone, Internet, satellite, and cable services	6c.	\$
		r. Specify:	6d.	\$ \$
		housekeeping supplies	7.	\$
1	3. Childcare	and children's education costs	8.	
\$. Clothing,	laundry, and dry cleaning	9.	\$
10	. Personal	care products and services	9. 10.	\$e
11		nd dental expenses		\$
12	Transport	ation. Include gas, maintenance, bus or train fare.	11.	\$
	Do not incl	ude car payments.	12.	\$
13	Entertainn	nent, clubs, recreation, newspapers, magazines, and books	13.	\$
14	Charitable	contributions and religious donations	14.	\$
15		ude insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life in	surance	15a.	œ
	15b. Health	insurance	15a. 15b.	\$
	15c. Vehicl	a insurance	15c.	\$
	15d. Other	insurance. Specify:	15d.	\$ \$
16.	Taxes. Do r	not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$
17.		or lease payments:		
	17a. Car pa	yments for Vehicle 1	17a.	\$
	17b. Carpa	ments for Vehicle 2		
	17c. Other.	Specify:	17b.	\$
		Specify:	17c.	\$
8.	Your payme	nts of alimony, maintenance, and support that you did not report as deducted from line 5, Schedule I, Your Income (Official Form 106I).	17đ. 18.	\$
9.	Other payme	ents you make to support others who do not live with you.		\$
		you wan you.	40	٥
		operty expenses not included in lines 4 or 5 of this form or on Schedule I: Your Incom	19. e .	\$
		es on other property	20a.	\$
	20b. Real es	ate taxes	20a. 20b.	
	20c. Property	r, homeowner's, or renter's insurance		\$
		ance, repair, and upkeep expenses	20c. 20d.	\$ \$
		ner's association or condominium dues		\$
			20e.	\$

Page 61 of 76 Document Debtor 1 Case number (if known)_ 21. Other. Specify: Your monthly expenses. Add lines 5 through 21. The result is the monthly expenses of Debtor 2. Copy the result to line 22b of Schedule J to calculate the total expenses for Debtor 1 and Debtor 2. 22. 23. Line not used on this form. 24. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage? No. Yes. Explain here:

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Debtor 1	<u>YUUNCIU</u>	IWWW	lunch	
Debtor 2	First Name	Middle Name	Last Name	
	First Name	Middle Name	Last Name	
United States E	3ankruptcy Court for the	: Northern District of	Illinois	
Case number				

Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Yes. Name of person	40. 17.
	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
er penalty of perjury, I declare that I hav they are true and correct.	e read the summary and schedules filed with this declaration and
er penalty of perjury, I declare that I hav they are true and correct.	e read the summary and schedules filed with this declaration and

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Fill in	this in	formation to ide	ntify your case:				
Debtor	1 _	Valencia	Joshaun	lynch			
Debtor		First Name	Middle Name	Lafst Name			
			Middle Name the: Northern District o	Last Name of Illinois			
Case ni (If know	umber	****		. 70.707			
(II KHOW							Check if this is an amended filing
		orm 107					
					viduals Filing fo		04/10
Ottiliai	AOTE II	inore space is t	ieeuea, attach a sepa	rried people are filir rate sheet to this fo	ig together, both are equally rm. On the top of any additio	responsible for supplying	correct
mber	(if kno	wn). Answer eve	ery question.		on the top of any addition	nai pages, write your han	ie and case
art 1	Gi	ve Details Abo	out Your Marital St	atus and Where \	ou Lived Before		
Wha	f is vo	ur current marit	al etatuc?				
	Married		ar status:				
	viarried Not mai						
D	46-	Sant O b					
		iasi s years, nav	e you lived anywhere	other than where y	ou live now?		
	es. Lis	st all of the places	you lived in the last 3	years. Do not include	where you live now.		
	Debto	or 1:		Dates Debtor 1 lived there	Debtor 2:		Dates Debtor 2 lived there
					Same as Debtor 1		Same as Debtor 1
	Numbe	er Street		From	Number Street		From
				То			То
	0.7					9 9 9 9 H H M F L	
	City		State ZIP Code		City	State ZIP Code	
					Same as Debtor 1		Same as Debtor 1
•	Numbe	r Street		From	Number Street		From
		**************************************		То			To
	City		0	-			
	City		State ZIP Code		City	State ZIP Code	
Within states	n the la	ast 8 years, did y	ou ever live with a sp	ouse or legal equiv	alent in a community propert a, New Mexico, Puerto Rico, Ti	y state or territory? (Com	munity property
علا لي		er.				exas, vvasnington, and vvis	consin.)
☐ Ye	s. Mak	e sure you fill out	Schedule H: Your Cod	debtors (Official Form	106H).		
12:	Expla	in the Source	s of Your Income				

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Debtor 1

Wat Name Who W	**	Doddinent	1 age 0+ 01 10	
			Case number (if known)	

Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply	Gross income (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$	Wages, commissions, bonuses, tips	\$
Particle	_			
For last calendar year: (January 1 to December 31.	Wages, commissions, bonuses, tips	\$	Wages, commissions, bonuses, tips	\$
YYYY	Operating a business		Operating a business	
For the calendar year before that:	Wages, commissions, bonuses, tips		☐ Wages, commissions,	
(January 1 to December 31, YYYY)	Operating a business	\$	bonuses, tips Operating a business	\$
ist each source and the gross income from e	ach source separately. Do	not include income that	and they collected from laws and together, list it only once you listed in line 4.	under Debtor 1.
ist each source and the gross income from e	each source separately. Do	not include income that	o togetner, list it only once	under Debtor 1.
ist each source and the gross income from e	each source separately. Do Debtor:1	not include income that	you listed in line 4. Debtor 2.	under Debtor 1.
ist each source and the gross income from e	Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	you listed in line 4.	Gross income from each source (before deductions and exclusions)
ist each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
ist each source and the gross income from e	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
ist each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
ist each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
ist each source and the gross income from e No Yes. Fill in the details. From January 1 of current year until the date you filed for bankruptcy:	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
In the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and
In the details. From January 1 of current year until the date you filed for bankruptcy: For last calendar year:	Debtor 1 Sources of income Describe below.	not include income that Gross income from each source (before deductions and	you listed in line 4. Debtor 2 Sources of income	Gross income from each source (before deductions and

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Debtor 1

	•		_	
Yatano	ÚĽ	Inhaun	\d\	rh
		10.01	1016	IL C L
First Name	Middle	Name	i ast Name	

Case number (if known)_

Part 3:	List	Certain	Payments	You Ma	de Befoi	re You	Filed fo	or Bankrup	tcy
									_

Are eith	ner Debtor 1's or Debtor 2's debts primarily c	onsumer deb	ots?								
	Neither Debtor 1 nor Debtor 2 has primarily "incurred by an individual primarily for a persor	consumer de	ehts. Consumer dehts a	re defined in 11 U.S.C. § 10	1(8) as						
	During the 90 days before you filed for bankruj			f \$6.425* or more?							
	☐ No. Go to line 7.		, ,								
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.										
	* Subject to adjustment on 4/01/19 and every 3										
☐ Yes.	Debtor 1 or Debtor 2 or both have primarily	consumer de	ebts.								
	During the 90 days before you filed for bankrup			\$600 or more?							
	☐ No. Go to line 7.										
	Yes. List below each creditor to whom you creditor. Do not include payments for a alimony. Also, do not include payment	domestic supp	ort obligations, such as	child support and							
		Dates of payment	Total amount paid	Amount you still owe	Was this payment for						
			\$	\$							
	Creditor's Name		Ψ		☐ Mortgage						
					Car						
	Number Street				Credit card						
					Loan repayment						
					Suppliers or vendors						
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	ČL.				• •						
	City State ZIP Code				Other						

Page 66 of 76 Debtor 1 Case number (if known) 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. DIM P Yes. List all payments to an insider. Dates of Amount you still Reason for this payment Total amount payment paid Insider's Name Number Street ZIP Code Insider's Name Number Street State 8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount Amount you still Reason for this payment payment Include creditor's name Insider's Name Number Street City ZIP Code Insider's Name Number Street

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City

ZIP Code

Page 67 of 76 Debtor 1 Case number (if known) Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. 3 M Yes. Fill in the details. Court or agency Status of the case Case title Pending Court Name On appeal Number ☐ Concluded Street Case number ZIP Code Case title Pending Court Name On appeal Number ☐ Concluded Street Case number City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Date Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. State ZIP Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Number Street Explain what happened Property was repossessed. Property was foreclosed. Property was garnished. City ZIP Code Property was attached, seized, or levied.

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Debtor 1 Case number (if known) 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. Describe the action the creditor took Date action Amount was taken Creditor's Name Number Street Last 4 digits of account number: XXXX-12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ No Yes Part 5: **List Certain Gifts and Contributions** 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ☐ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift City Person's relationship to you Gifts with a total value of more than \$600 Describe the gifts Dates you gave per person the gifts Person to Whom You Gave the Gift Number Street State ZiP Code Person's relationship to you _ Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Document Page 70 of 76 Debtor 1 Case number (if known)_ Description and value of any property transferred Date payment or Amount of transfer was made payment Person Who Was Paid Number Street State ZIP Code Email or website address Person Who Made the Payment, if Not You 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. O No Yes. Fill in the details. Description and value of any property transferred Date payment or Amount of payment transfer was Person Who Was Paid Number Street City State ZIP Code 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details. Description and value of property Describe any property or payments received Date transfer transferred or debts paid in exchange was made Person Who Received Transfer Number Street City State ZIP Code Person's relationship to you Person Who Received Transfer Number Street City ZIP Code

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Person's relationship to you _

Page 71 of 76 Debtor 1 Case number (if known)_ 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No. Yes. Fill in the details. Description and value of the property transferred Name of trust Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. □ No Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved, closing or transfer or transferred Name of Financial Institution XXXX-___ ☐ Checking ☐ Savings Number Street Money market ☐ Brokerage City ZIP Code Other ☐ Checking XXXX-Name of Financial Institution ☐ Savings Number Street Money market ☐ Brokerage Other_ 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? □ No Name of Financial Institution ☐ Yes Name Number Street Number Street City State ZIP Code

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Debtor 1 Case number (if known) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Who else has or had access to it? Describe the contents Do you still have it? ☐ No Name of Storage Facility Name Yes Number Street City State ZIP Code State ZIP Code Part 9: identify Property You Hold or Control for Someone Eise 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. □ No Yes. Fill in the details. Where is the property? Describe the property Value Owner's Name Number Street Number Street City State ZIP Code State ZIP Code Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? ON No Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code City State ZIP Code

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Page 73 of 76 Debtor 1 Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State ZIP Code 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No. Yes. Fill in the details. Court or agency Status of the Nature of the case Case title Pending Court Name On appeal Number Street ☐ Concluded Case number State ZIP Code Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation ☐ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business Employer Identification number Do not include Social Security number or ITIN. **Business Name** Number Street Name of accountant or bookkeeper Dates business existed To_ City State ZIP Code Describe the nature of the business Employer Identification number Business Name Do not include Social Security number or ITIN. Number Street Name of accountant or bookkeeper Dates business existed

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Debtor 1

First Name Mid	de Name Las	it Name	Case number (# known)	
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	Describe the nature of the business	Employer identification number Do not include Social Security number or ITIN.
Business Name	-	DO NOT MICHAEL OCCUR, DECUMY MARINER OF THE
		EIN:
Number Street	Name of accountant or bookkeeper	Dates business existed
City State ZIP Code		From To
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	ptcy, did you give a financial statement to anyone al	oout your business? Include all financial
institutions, creditors, or other parties.		
□-w ₀		
Yes. Fill in the details below.		
	Date issued	
Name	MM / DD / YYYY	
Number Street		
Hamber Street		
City State ZIP Code		
art 12: Sign Below		
angle 23 Sign Below		
I have read the answers on this Statemen	et of Financial Affairs and any attachments, and I dec	clare under penalty of perjury that the
answers are true and correct. I understar	d that making a false statement, concealing propert result in fines up to \$250,000, or imprisonment for	y, or obtaining money or property by fraud
18 U.S.C. §§ 152, 1341, 1519, and 3571.	result in times up to \$250,500, or supresonment for	up to 20 years, or both.
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Signature of Debtor 1	Signature of Debtor 2	
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	tatement of Financial Affairs for Individuals Filing fo	or Rankruntev (Official Form 407)2
5	tatement of Financial Antana for Individuals Filling It	Dankrupicy (Omeiar rollin 107)?
U No		
☐ Yes		
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/	o is not an attorney to help you fill out bankruptcy fo	rms?
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Yes. Name of person	Attach Decla	n the <i>Bankruptcy Petition Preparer's Notice,</i> pration, and Signature (Official Form 119).
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Fill in this information to id	lentify your case:	Constant of the	
Debtor 1 First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	
United States Bankruptcy Court	for the: Northern District of I	Ilinois	
Case number (If known)			
		,	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims

For any creditors that you listed in Part 1 of Schedule D: C information below.	reditors Who Have Claims Secured by Property (Offici	ial Form 106D), fill in the
Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Dissan Assan Motor Allan Description of property securing debt: 2015 Nisson Altin	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	☐ No ☐ Yes
Creditor's name: Wissan Motor Acceptance Description of property 2013 Missan Altima Po Box Wosbb Dallas, TX, 7524	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Betain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:	□ No □ Yes
Creditor's name: Description of property securing debt:	☐ Surrender the property. ☐ Retain the property and redeem it. ☐ Retain the property and enter into a Reaffirmation Agreement. ☐ Retain the property and [explain]:	□ No □ Yes

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Debtor 1

Document

Case number (If known),

Part 2:

List Your Unexpired Personal Property Leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G)
fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet
ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	☐ No
Description of leased property:	La Yes
Lessor's name:	No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
Lessor's name:	□ No
Description of leased property:	Yes
ort 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my intention about any property of my estate th personal property that is subject to an unexpired lease.	at secures a debt and any
× What I zero	
Signature of Debtor 1 Signature of Debtor 2	
Date S G 20 / WYY Date MM / DD / YYYY	